

Letters to the Editor

Liver metastasis from colorectal cancer 12 years after liver transplantation

Key words: Liver transplantation. Liver metastasis. Colorectal cancer.

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Dear Editor,

Liver transplant is an effective therapy for multiple liver conditions. However, the development of *de novo* malignancies in these immunosuppressed patients is now becoming a common complication, with an incidence of 5-15% (1). This incidence is twice to three times higher than among the general population of matching age and general status. Some European studies have described colorectal cancer cases in patients with a liver transplant (2).

Case report

We report the case of an immunosuppressed liver transplant patient treated with steroids and tacrolimus who, 12 years after transplantation, underwent a resection for a colonic obstructive neoplasm. The pathology study revealed a well-differentiated adenocarcinoma with perirectal infiltration and uninvolved surgical margins or lymph nodes. Immunosuppression was modified after surgery with the introduction of everolimus.

Liver metastases in segments IV and VII were identified after six months, which prompted a left hepatectomy and microwave

ablation of metastasis in segment VII. After three months of follow-up the condition is currently under control.

Discussion

We performed a literature review of the PubMed database using “liver transplantation”, “neoplasm metastases”, and “colorectal cancer” as keywords, and found no similar cases.

The incidence of colorectal cancer seems higher in patients with liver transplant as compared to the general population. In liver transplant patients colorectal cancer is identified at an earlier age and is associated with a poorer prognosis (3).

This case clearly reflects such greater biological aggression, with a colonic obstructive neoplasm developing after 12 years on immunosuppression, followed by rapidly evolving metastatic disease.

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References

1. Catalina MV, De Diego A, García-Sánchez A, et al. Characterization of novo malignancies in liver transplantation. *Gastroenterol Hepatol* 2003;26:57-63. DOI: 10.1016/S0210-5705(03)79044-X
2. Silva MA, Jambulingam PS, Mirza DF. Colorectal cancer after orthotopic liver transplantation. *Crit Rev Oncol Hematol* 2005;56:147-53. DOI: 10.1016/j.critrevonc.2004.12.013
3. Shinsuke K, Kumiko H, Eiji S, et al. Six cases of primary colorectal cancer after living-donor liver transplantation: A single-institution experience in Japan. *Jpn J Clin Oncol* 2012;42:586-90. DOI: 10.1093/jjco/hys073