



03/18/24 Morning Report with @CPSolvers



“One life, so many dreams” Case Presenter: Suraj Shah (@suraj_shah28) Case Discussants: Maria de Miguel (@MDMariadeM)

CC: 61 yo M coming in with abdominal pain
HPI: 2-3 weeks of crampy generalized abdominal pain without radiation, predominantly in upper abdomen, occurs few times a day without clear triggers (specific foods, act of eating, other activities). Severity was 6-8/10 at worst. Notably associated w/ heartburn.

No n/v, constipation, dysphagia, bleeding, diarrhea, dark stools. Avoids dairy at baseline. Previously taking pantoprazole daily which relieved symptoms but patient stopped taking it. Relieved by Alka Seltzer. 25 lb weight loss attributed to semaglutide, no worsening symptoms. Similar pain now compared to 8 yrs ago (during the time of EGD).

PMH:
CAD (s/p 4-vessel bypass)
DM (suboptimally controlled)
CKD stage III
GERD (s/p EGD 8y ago)
Acute gangrenous cholecystitis (s/p lap chole)
Hyperlipidemia (controlled)
Meds:
Semaglutide, BB, ACE-I, Metformin, Empagliflozin, Atorvastatin, PPI

Fam Hx: No cancers and cancer syndromes
Health-Related Behaviors:
No alcohol, no drug use, never smoker, parents smoked at home (second hand smoke exposure).
No NSAID use.

Vitals: T: afebrile HR: 60-80s BP:120/80 RR: SpO2: >95% on RA

Exam:

Gen, HEENT, CV, Pulm, Neuro, Extremities/skin: wnl

Abd: No tenderness, no referred pain, negative provocative maneuvers, no guarding. **6-week FU:** Very tender abdomen esp. in the RUQ on the background of diffuse abd tenderness to palpation, no peritoneal signs.

6-week FU: Worsening symptoms despite PPI trial of 6 wks. No PO intake. Semiology of the pain has not changed, similar pain, worsening GERD, cramping, + nausea, non bilious vomiting, not able to keep anything down. Further weight loss (from 25 before, now 30-45 lbs). Sent to ED.

Notable Labs & Imaging:

Hematology:

WBC: 7.6 Hgb: 13.6 Plt: 147k

Chemistry:

Na: 135 K: 5.2 Cl: HCO3: 26 BUN: Cr: 2.5 (baseline: 1.8).

AST: 27; ALT:43; Alk-P: 80, T.bili 0.8; direct bili: 0.3

Urinalysis: (+) Glucosuria, No hematuria/pyuria. Lipase: 80.

HCV Ab, HbsAg, HbsAg, HbcAb all (-). HbA1c: Stable at 9.6%.

Imaging:

CTAP w/ IV contrast: 4.8 cm pancreatic head mass with pancreatic duct dilation, possible colitis (thickening, fat stranding)

Upper endoscopy with UTZ and FNA: Pancreatic adenocarcinoma

CT Chest: No signs of metastatic disease

CT of abdomen: Tumor encasement of SMA and SMV, possible stomach and liver metastatic burden, retroperitoneal & mesenteric LN mets.

CA19-9: 11.1 (ULN: 35); CEA 16.9 (ULN 4.7); CA-125: 74.8 (ULN: 35).

Dx: Pancreatic adenocarcinoma (d/c on pain control regimen, outpatient oncology f/u → Palliative radiation, neoadjuvant chemotx. Still poor PO intake and 85 lb weight loss).

Problem Representation: 61 y/o M w/ a PMH of GERD, laparoscopic cholecystectomy 8 yrs prior, CAD, DM, CKD stage III, w/ no family hx of cancer, p/w generalized abdominal pain for 2 wks w/o triggers, and 25 lbs weight loss/past year. Physical exam reveals RUQ tenderness, CTAP reveals 4.8 cm pancreatic head mass.

Teaching Points (Kuchal Agadi):

- 1. Abdominal Pain:-** Mnemonic to illicit the complete Hx: OLD CARTS (onset/location/Duration/Characteristic/Alleviating & aggravating factors/ Radiation/ Timing/Severity)
- 2. Red flags for Abdominal pain:** (a) Acuity, (b) Vital Signs, (c) Inability to tolerate food, (d) bleed- (e) Inability to move, (f) **Weight loss**, (g) Change in stool- caliber.
- Sudden stopping PPI -can cause rebound increased GI secretion. Sudden weight loss- tends to precipitate GB stone.
- Beta blockers: mark the tachycardia. Hence in a person with Abdominal pain, and on beta blocker, ? internal bleed masked.- Anemia work up would help in Dx. LFTs- r/o Biliary cause
- PO contrast: images the full GI tract. Plain X Ray : Air fluid levels
- Pancreatic Cancer: early stages is quiet, subtle. Might not be diagnosed.
- Tumor Markers: will help in confirming Dx, and helpful during the follow up after treatment.
- Subtle presentation for cancers; Ovary, Pancreatic.