

**Gastric Metastasis of Cervix Uteri Carcinoma, Rare Cause of Lower Gastric Stenosis**

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**Abstract**

*Aim:* the paper presents a rare case of metachronous gastric metastasis of uterine cervix cancer, clinically manifested through severe pyloric stenosis.

*Method:* 49-year-old patient, operated on in January 2009, with uterine cervix cancer (Squamous cell carcinoma T2bN1M0), is hospitalized in August 2011 with pyloric stenosis: epigastric pains, abundant, stasis, late postprandial emesis, significant weight loss, stomach form visible upon abdomen inspection. Endoscopy: antral stenosis with intact gastric mucosa, and CT-scan: circumferential intramural gastric tumor, stomach dilated in the upper part, lack of cleavage between the tumor and the liver bed of the gall bladder. CEA increased to 13,78 (below 5), CA 19-9 slightly increased 29.9 (below 27). The case is considered as a second neoplasia and a D2 subtotal gastrectomy was performed, with 1 positive ganglion out of 27 on block with atypical hepatectomy of segments 4-5 for liver invasion, the final mounting being Y Roux.

*Results:* The histopathological examination shows a gastric metastasis of squamous carcinoma, of uterine cervix origin, the invaded perigastric ganglion having the same aspect of uterine cervix carcinoma. The post-surgery evolution was favorable, under chemo radiotherapy the patient being alive without relapse at 9 months post-surgery.

*Conclusion:* In the literature there are 2 more cases of gastric metastasis of uterine cervix carcinoma, and 4 of uterine carcinoma without topographic indication, but without the histological documentation of the tumor filiation, without data related to resectability or follow-up, the case at hand being, from this perspective, the first documented resectable metachronous gastric metastasis from a cervix uteri carcinoma.

**Key words:** gastric metastasis, metastasis of uterine cervix cancer

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