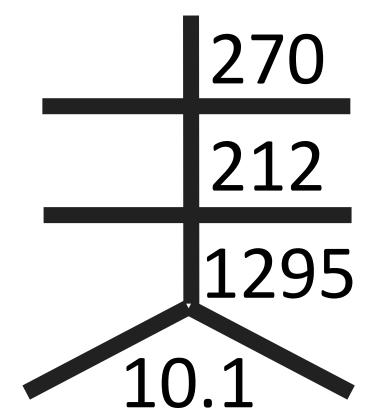
## A Rare Presentation of Metastatic Melanoma with Obstructive Jaundice and Pancreatitis Scripps due to Pancreatic Metastasis with Invasion into the Common Bile Duct

### Introduction

- Malignant melanoma is a highly aggressive and unpredictable cancer with high rates of metastasis
- We present an interesting presentation of metastatic melanoma of the pancreas and invasion into the common bile duct through the case of a patient presenting with pancreatitis

### **Case Presentation**

- 84M with PMH of melanoma presented with epigastric abdominal pain and jaundice
- 3-years prior he had undergone a wide local excision for cutaneous melanoma (R0 resection)
- Initial studies



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- CT showed pancreatic head lesion along with biliary and main pancreatic duct dilatation
- Cholangiogram with distal biliary stricture. Cytology brushings were unsatisfactory for evaluation
- Subsequent EUS-FNB results consistent with malignant melanoma
- Follow-up: Patient has since been discharged and undergoing further evaluation for management

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### Imaging

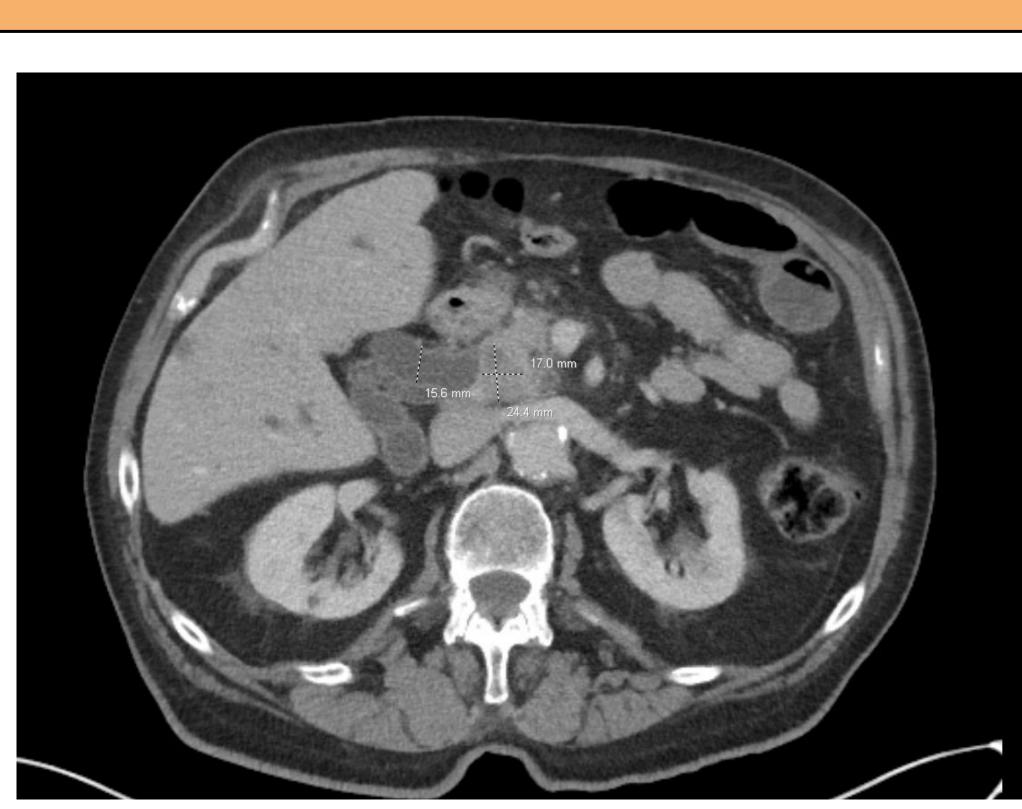


Figure 1: CT showing 2.4 cm lesion in the head of the pancreas and biliary dilatation



Figure 3: Fluoroscopy showing deployment of metal stent across biliary stricture

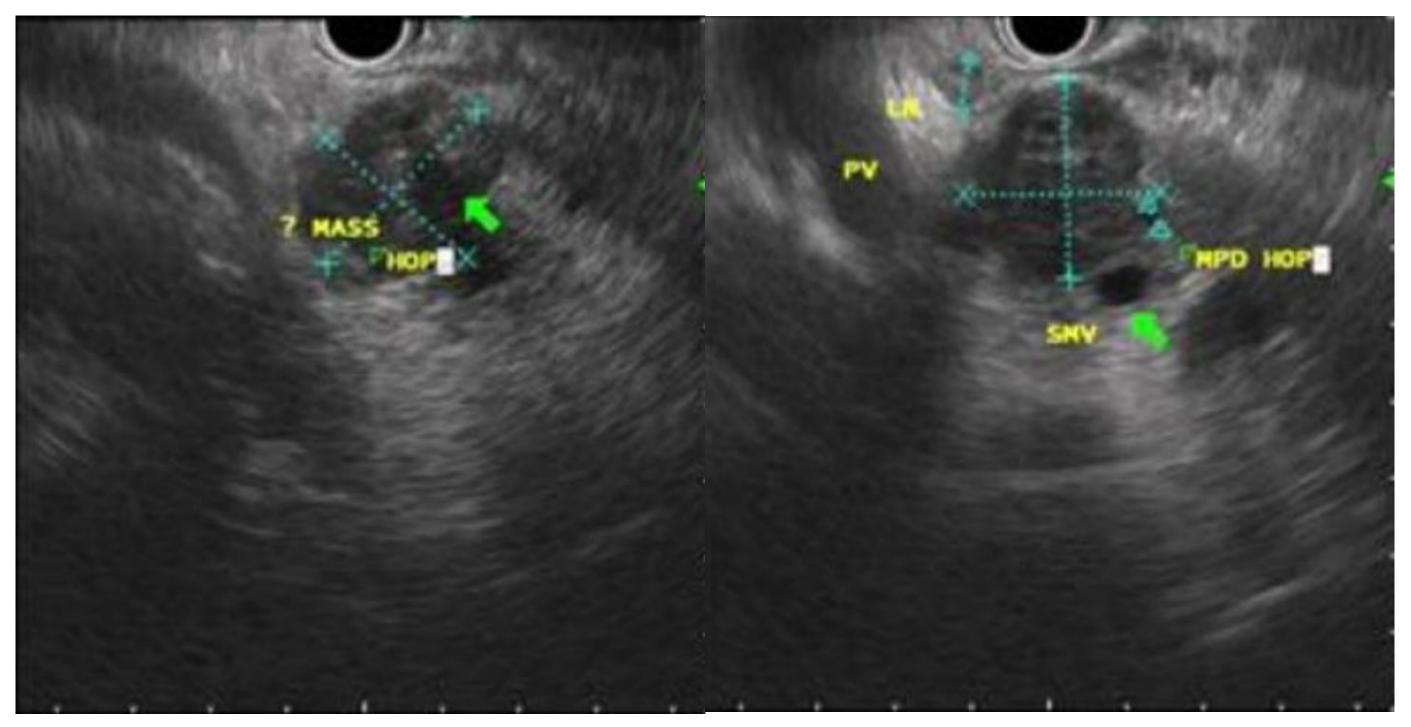


Figure 4: Linear EUS demonstrating FNB of 25 mm x 25 mm mass in the pancreatic head.

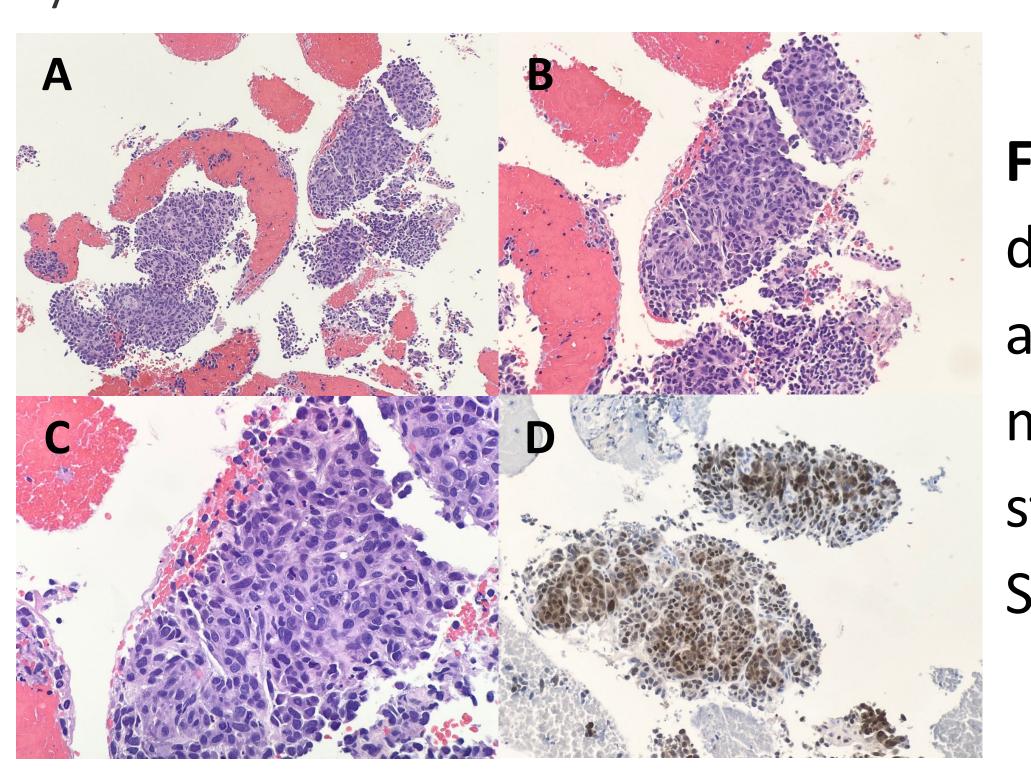




Figure 2: Cholangiogram revealed a single, irregular, high grade ~15mm distal biliary stricture with upstream dilation

Figure 5: H&E stains showed poorly differentiated malignancy with epithelioid and focal spindle cell at varying magnifications. Immunohistochemical stains (D) features with positive S100 and SOX 10.

### Discussion

# Conclusions

### References



• Approximately one-third of patients with malignant melanoma develop metastases • Metastatic cutaneous melanoma of the GIT is seen in 2-4% of patients. Most commonly affected sites are the small bowel (75%), colon (25%), liver (16%) and stomach (16%). Metastatic tumors to the pancreas are uncommon, representing about 2% of all pancreatic malignancies with isolated pancreatic metastasis representing only 1%. • Median survival with stage IV melanoma ranges from 8-18 months after diagnosis

• Melanoma is an aggressive malignancy with almost <sup>1</sup>/<sub>3</sub> of patients developing metastasis • The GIT is a rare metastatic area for melanoma with the pancreas being an extremely rare site • Despite recent advances with pathway-target inhibtiors and immune checkpoint agents metastatic melanoma still has a poor prognosis

1. Nikfarjam M, Evans P, Christophi C. Pancreatic resection for metastatic melanoma. HPB (Oxford). 2003;5(3):174-179. doi:10.1080/13651820310015284

2. 2. Larsen AK, Krag C, Geertsen P, Jakobsen LP. Isolated malignant melanoma metastasis to the pancreas. Plast Reconstr Surg Glob Open. 2013;1(8):e74. Published 2013 Dec 6. doi:10.1097/GOX.0000000000000018 3. 3. Colovic RB, Grubor NM, Jovanovic MD, Micev MT, Colovic NR. Metastatic melanoma to the common bile duct causing obstructive jaundice: a case report. World J Gastroenterol. 2007;13(5):813-815. doi:10.3748/wjg.v13.i5.813 4. 4. Wang, Jun-Ke MDa; Su, Fei MDb; Ma, Wen-Jie MDa; Hu, Hai-Jie MDa; Yang, Qin MDa; Liu, Fei MDa; Li, Quan-Sheng MDa; Li, Fu-Yu MD, PhDa,\* Primary malignant melanoma of the gallbladder with multiple metastases, Medicine: November 2017 - Volume 96 - Issue 46 - p e8793 doi: 10.1097/MD.000000000008793