



Introduction

- Glomus tumors are rare mesenchymal neoplasms arising from glomus bodies.
- Occur mostly as benign tumors in the subungual region of the digits.
- Glomus tumors of the gastrointestinal tract (GGT) are rare, where there may be few or no glomus bodies.
- Majority of GGT are benign, rarely demonstrating malignant behavior.
- We present a case of a metastatic glomus tumor of the stomach, which was initially deemed benign.

Case Presentation

- 72-year-old woman underwent excision of a gastric mass with a partial gastrectomy in 2010, suspecting a Gastrointestinal stromal tumor (GIST).
- Pathology findings were consistent with glomus tumor of uncertain malignant potential - borderline tumor size (2 cm) and increased mitotic activity ($\geq 5/50$ HPF).
- Not started on chemotherapy
- She was on surveillance and was asymptomatic until 2016.
- Sep 2016 - presented with acute abdominal pain. Imaging showed multiple new necrotic metastases throughout the liver with pathology consistent with metastatic glomus tumor.
- Underwent radioembolization of the right hepatic and left hepatic artery in July 2017
- Continued to be symptom-free until 2019

Case Presentation

- Sep 2019 - another episode of abdominal pain; imaging showed an increase in the number of liver lesions and underwent radioembolization with a good response.

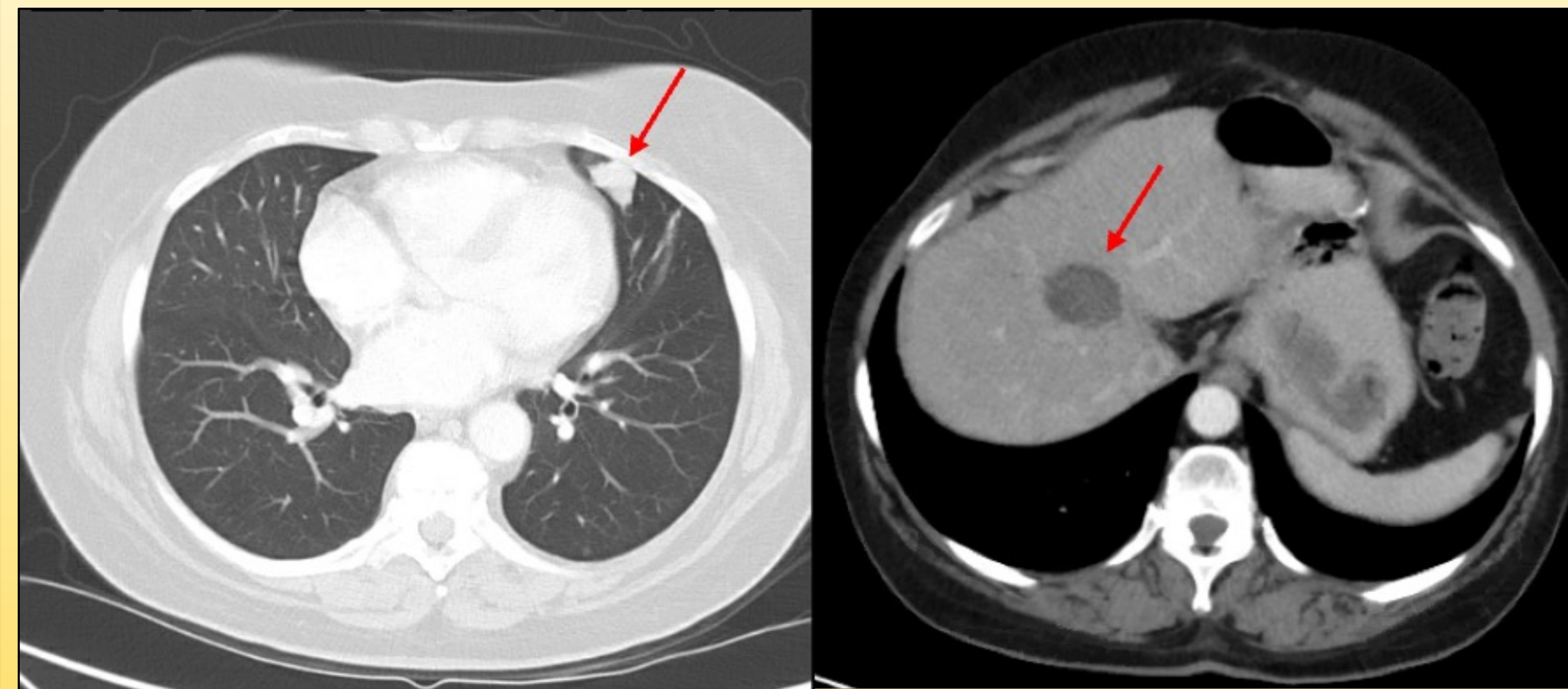
Surveillance imaging:

- May 2020 showed a nodule in the lingula. A CT-guided lung biopsy confirmed the diagnosis of an epithelioid neoplasm, consistent with a metastatic glomus tumor.
- December 2021 and July 2022 showed essentially stable liver and lung lesions - Continues on monitoring.

Caris genomic testing:

- No apparent mutations; No clear molecular targets for treatments were present.
- Low ERCC1 and TOPO1 detected - suggesting that oxaliplatin and irinotecan may be considered for treatment in case of disease progression.

Imaging



a) CT Thorax with metastatic glomus tumor in lingula of left lung

b) CT Abdomen with metastatic glomus tumor in liver

Discussion & Conclusion

- Our case highlights the importance of considering glomus tumors as part of the differentials in GI mesenchymal tumors despite GIST having the highest incidence.
- Most glomus tumors in GI tract are solitary and located in the gastric antrum; they are rarely reported in multiples.
- Glomus tumors present with abdominal pain, gastrointestinal bleeding, perforation, or can also be found incidentally with no symptoms.
- It is known that many GI mesenchymal tumors have visual and radiological similarities, and hence a biopsy is required.
- Although majority of glomus tumors are benign, obtaining histological and immunohistochemical features is still imperative to make a definitive diagnosis to detect malignant glomus tumors with metastatic potential to visceral organs as they have a poor prognosis.
- Surgical treatment is the preferred option for gastric glomus tumor.
- Long-term follow-up is required due to high metastatic and recurrence rate in the malignant type.

References

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