



**The 13th Asia-Pacific Primary Liver Cancer
Expert Meeting**

Novel Insights into the Evolution of Liver Cancer Management
July 6-8, 2023 | Grand InterContinental Seoul Parnas, Seoul, Korea

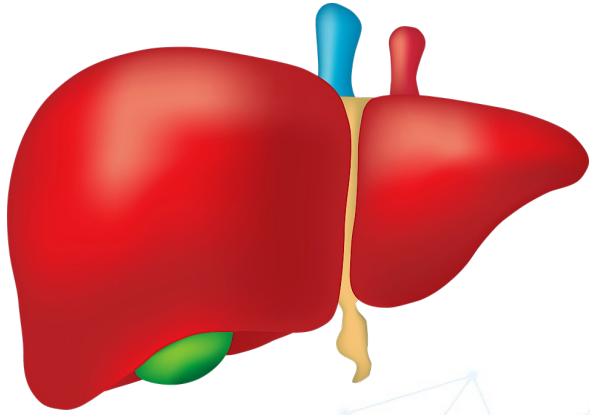
Diagnosis of Intrahepatic Cholangiocarcinoma, Poorly Differentiated Signet Ring Cell Subtype: A Case Report In the Philippines

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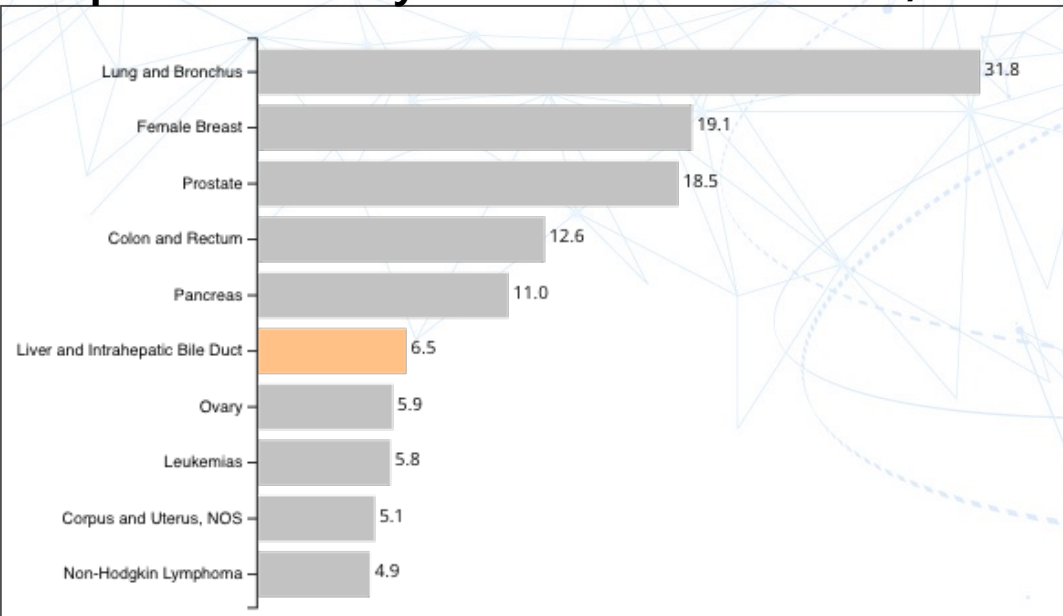
To present a rare case of Intrahepatic Cholangiocarcinoma, Poorly Differentiated Signet Ring Cell Subtype

To demonstrate key features of this rare subtype of Intrahepatic cholangiocarcinoma as tumor heterogeneity continue to evolve

BACKGROUND



Top 10 Cancers by Rates of Cancer Deaths, 2020



- ❑ **Liver and Intrahepatic Bile Duct Cancers** is ranked as the 6th leading cause of cancer deaths (United States CDC, 2020)
- ❑ Intrahepatic Cholangiocarcinoma is the **2nd most common primary hepatic malignancy next to HCC**, with 10-15% of all liver cancers and highest in the South East Asian region
- ❑ Rare subtypes of iCCA with their differentiation have been determined and correlate with added aggressiveness and prognostication
- ❑ Only twelve (12) cases of a signet ring cell subtype of cholangiocarcinoma have been reported and eight (8) of them from South East Asia
- ❑ There are no case reports of this rare subtype in the Philippines to date.

METHODS

CASE DESCRIPTION

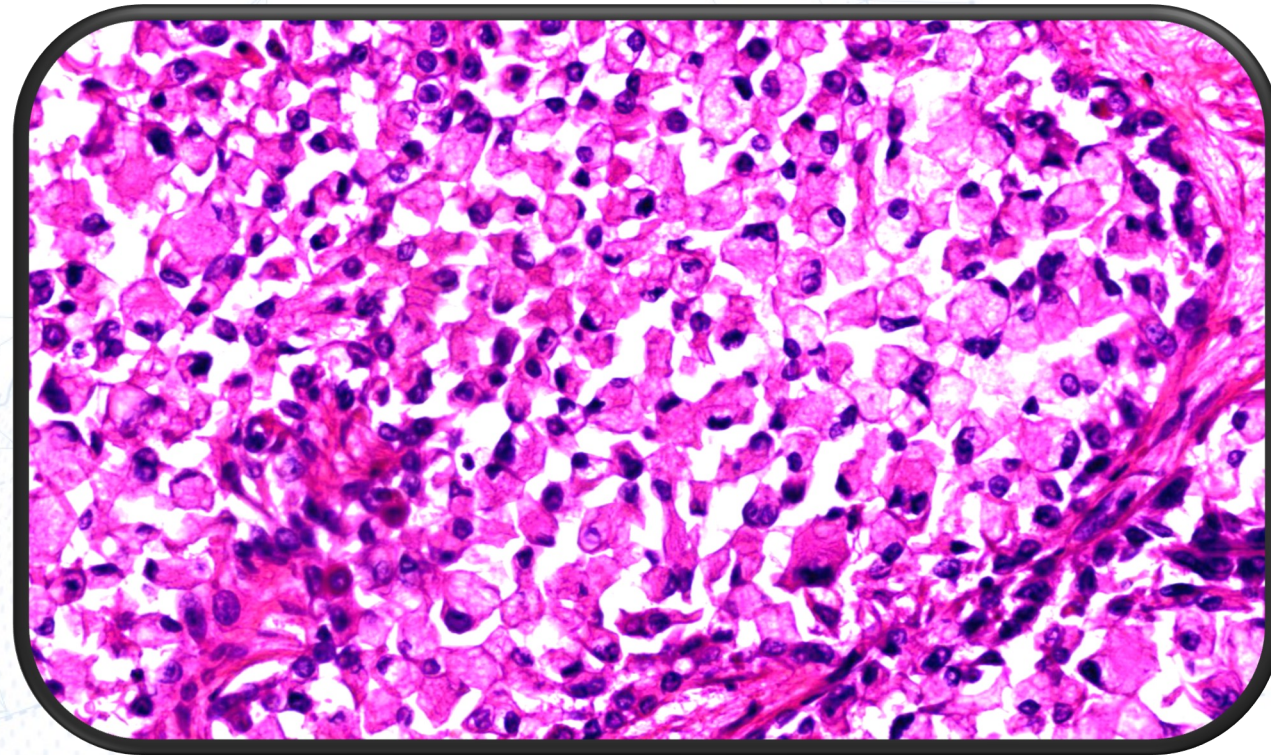
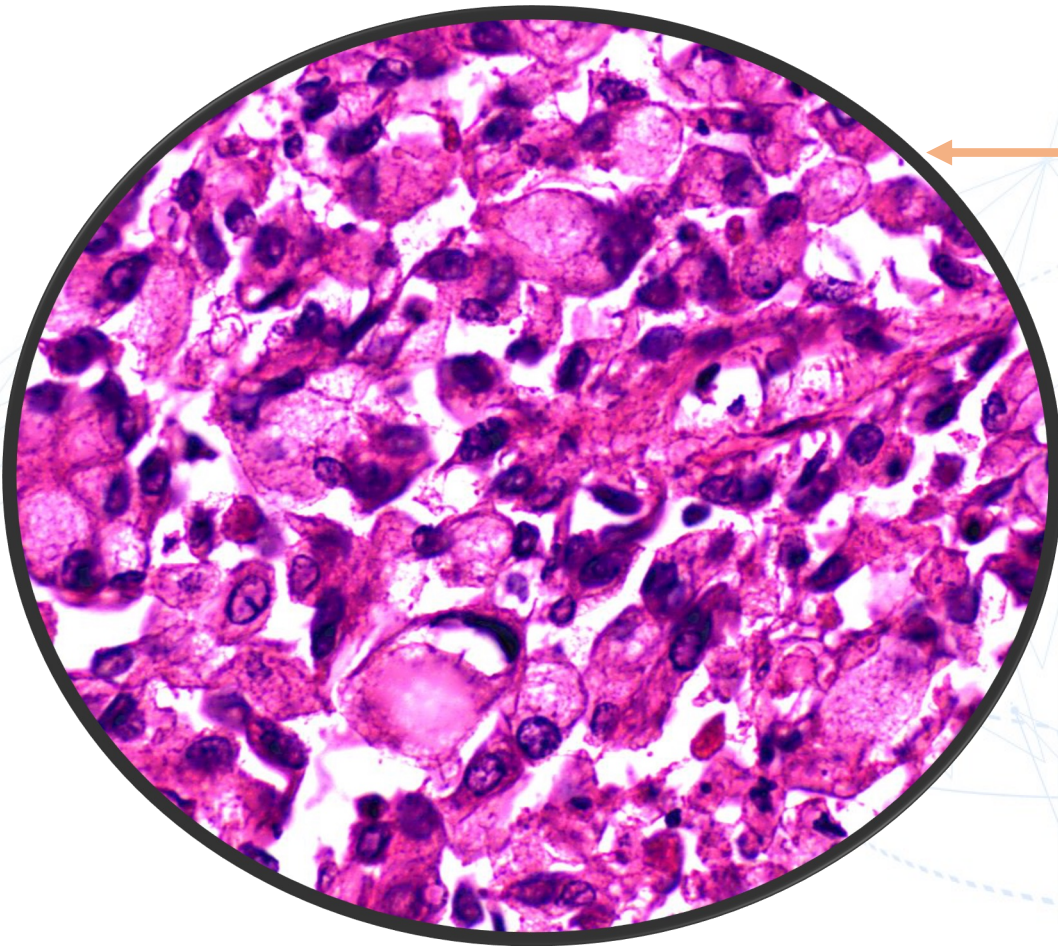
- ❑ A **58 year-old Male** sought consult due to a 1 month history of bloatedness and minimal weight loss
- ❑ CT scan showed **lobulated and septated hypodense mass with heterogenous and peripheral enhancement, located in segments II and III of the liver** measuring **7.1 x 6.9 x 5.9 cm**
- ❑ The patient had **no other lesions in the Gastrointestinal tract and the Genitourinary tract**

GROSS EXAMINATION

- ❑ Specimen labeled: **“Left Liver”**
- ❑ Weight: **504.5 grams**
- ❑ Size: **15.0 x 11.0 x 7.0 cm**
- ❑ Cut Sections: shows an ill-defined, cream-tan to pink, soft to firm mass measuring **7.5 x 7.1 x 5.6 cm**
- ❑ Margins: 0.3 cm from the nearest inked capsule



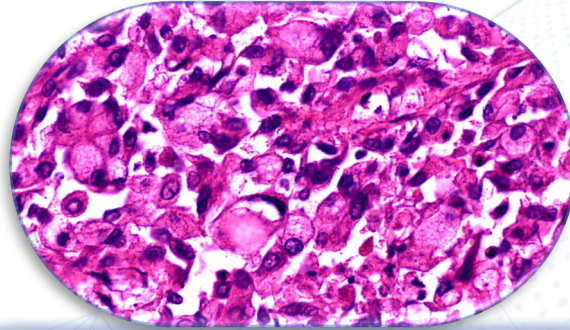
RESULTS



MICROSCOPIC EVALUATION:

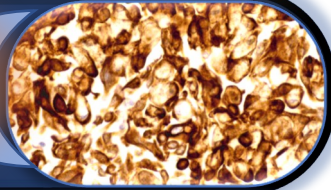
Abundant cellular elements with varisized, highly pleomorphic and intracellular mucin-forming vacuoles which displace the dense nuclei to the periphery of the cells forming signet-ring cell morphology

IMMUNOHISTOCHEMICAL STAINS



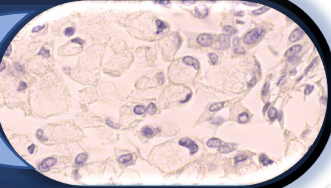
CK 7

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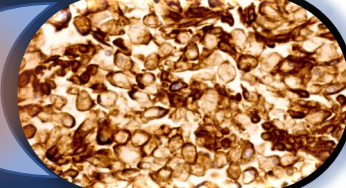
CK 20

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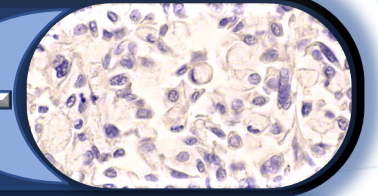
CK 19

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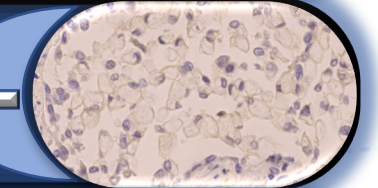
CDX2

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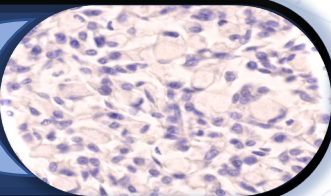
SYNAPTO

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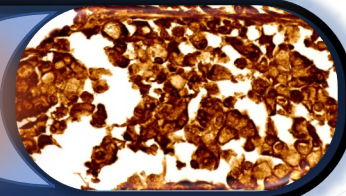
HEPPAR1

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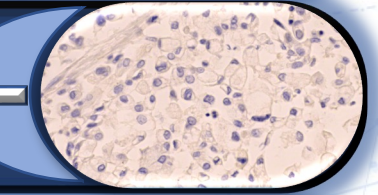
E-CAD

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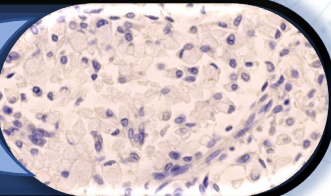
CHROMO

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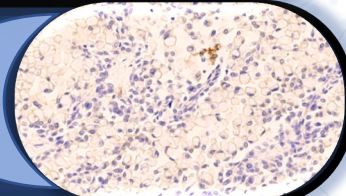
ARG 1

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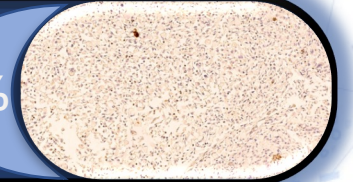
MOC 31

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KI67

8%



The above immunohistomorphologic features are consistent with the diagnosis of
INTRAHEPATIC CHOLANGIOCARCINOMA, SIGNET RING CELL SUBTYPE

CONCLUSIONS

- ❑ The relevance of the case and its accurate diagnosis have significant implications in post-operative treatment and prognostication due to the aggressive nature of the subtype
- ❑ **Differentiation is key** in the diagnosis in terms of determining whether it is from a primary liver tumor or a metastatic tumor from the gastrointestinal tract and genitourinary as morphologies may be similar
- ❑ **Histomorphology in correlation with immunochemistry, clinical data and communication** with the attending physician are necessary to establish the diagnosis
- ❑ Further studies including molecular analysis are ideal in the management