

**HOSPITAL DE CLÍNICAS DE PORTO ALEGRE
SERVIÇO DE GASTROENTEROLOGIA
TRABALHO DE CONCLUSÃO DE RESIDÊNCIA MÉDICA**

**METASTATIC MELANOMA WITH DISSEMINATED INVOLVEMENT OF THE
GASTROINTESTINAL TRACT IN A IMMUNOCOMPROMISED PATIENT: A CASE
REPORT**

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ABSTRACT

Malignant Melanoma is an epithelial cancer that arises from melanocytes, which can be found in tissues like skin (91%), eye (5%), and mucous membranes - oral cavity, nasopharynx, anus, urinary tract and even the gastrointestinal tract (3-4%). It is the fifth most common cancer worldwide, with an increase of incidence in the past two decades, while the mortality rate remains stable.

Metastatic intestinal melanoma is seen in around 60% of patients who die from the disease. Although, only 1.5 - 4.4% are detected before death. The clinical presentation is extremely variable, with most patients being asymptomatic. Abdominal pain, GI bleeding, anemia and GI obstruction (including intussusception) are the most common symptoms. Altered bowel habits, fatigue, weight loss, dysphagia and abdominal mass can also occur.

One case of disseminated GI metastatic melanoma was reported after a patient developed colitis secondary to an immune checkpoint inhibitors (IPCI) treatment. The patient was treated with high dose corticosteroids, along with Vedolizumab (an anti-integrin of T-lymphocytes on endothelial cells, reducing gut inflammation and, ultimately, suppressing only the gut immune-system). Although otherwise feasible in solid organ transplantation, no patient with that load of metastatic melanoma has been described so far.

KEYWORDS: Melanoma; Metastatic Melanoma; GI tract; Gastrointestinal tract; Immunocompromised

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