Cystic Gastrointestinal Stromal Tumor in a Collegiate Athlete
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Background: A 21 year-old African American male division III football player with past history of Wolf-Parkinson-White syndrome and chronic dyspepsia reported to the athletic training facility complaining of abdominal pain. The patient had no recollection of trauma to the area but did claim to suffer from indigestion. Examination revealed the patient had a distended stomach over the upper left quadrant. A nontender malignancy could be palpated in the area. The patient was referred to the team physician.

Differential Diagnosis: Tumor, Mononucleosis, Abdominal Cramp

Treatment: The patient was sent for an x-ray of the chest and abdomen, revealing nonspecific opacification under the left hemidiaphragm replacing the gastric air bubble and displacing the transverse colon inferiorly. A CT scan was then ordered, revealing an 18 centimeter multiloculated cystic mass in the upper left quadrant displacing the stomach, pancreas, transverse colon, and left kidney. The patient was referred to an oncologist, who drained and biopsied the mass. The patient presented at the emergency room several days later after becoming septic; here, surgeons decided to prematurely remove the cyst, which included the spleen, portions of the stomach and a group of lymph nodes. Following surgery the patient sustained a pneumothorax, which was treated during his 12-day stay at the hospital. At this point, biopsy revealed the mass was a gastrointestinal stromal tumor (GIST). After removal of the tumor, it was decided the best treatment was for the patient to receive a body scan every 6 months and will continue to do so for 3 years.

Uniqueness: The median age of those diagnosed with GIST is 66-69 and only 3 percent prevalence under the age of 21. GIST is one of the most common types of sarcoma, however; sarcoma-type cancer only occurs in 1 percent of all cancer patients. The median tumor size is between 5 and 8 centimeters. Our patient presented well below the median age for an already rare cancer with and with a tumor 3x the size of median.

Conclusion: Following presenting to Rowan University athletic training staff with abdominal pain, the patient was referred and eventually diagnosed with a gastrointestinal stromal tumor (GIST). Following drainage and infection, the tumor was removed and the patient has periodically received body scans. This is an incredibly rare cancer to begin with, and even more rare for the patient’s age.

Word Count: 407