

Recurrent synchronous multicentric desmoid tumor: A case report

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Desmoid tumor constitutes 3% of all soft tissue tumors and can be locally aggressive but lacks metastatic potential with high tendency to recur. DT can occur sporadically or in relation to Gardner's syndrome and FAP. Female in the reproductive age, previous trauma or surgery on the abdomen and younger age have higher tendency to develop DT. Clinical correlation with modern imaging such as CECT and MRI as well as histopathological biopsy and IHC are modalities used to diagnose DT, stage the disease and sub-classify DT to differentiate it from other form of fibroblastic or myofibroblastic diseases. Surgery is the primary mode of treatment and has cure potential. Despite complete microscopic resection, DT characteristics of high recurrence rate remains. Several phase II studies and retrospective studies have been conducted, looking into potential hormonal agents, targeted therapy and systemic therapy as adjuncts to surgery. However, due to its rarity, randomized controlled trial study of this study is nearly impossible. Here we present a case report of a recurrent multicentric abdominal wall and intraperitoneal desmoid tumors of a young lady whom had 2 previous abdominal surgeries prior to presentation.

Biography

Mohd Abdul Hadi Mohd Anuar is currently pursuing Masters of General Surgery in University of Malaya, Kuala Lumpur. He has completed MBBS degree in University of Malaya in the year 2011 and has been working as Surgical Trainee for 6 years.