Case report: Thigh sarcoma as a differential diagnosis of soft tissue collections

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ABSTRACT

Only around 1% of malignant tumors in adult patients are soft tissue sarcomas, but they have high rates of unfavorable outcomes. Based on the high prevalence of pathologies in the daily life of hospital emergencies that may have a similar clinical presentation, it is difficult to reach this diagnosis in the first doctor-patient contacts, with the need for great expertise on the part of the doctor to correctly manage the case.

Keywords: Sarcoma, Neoplasia, Collection.

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INTRODUCTION

Soft tissue sarcomas account for less than 1% of all malignant tumors in adult patients[1]. These tumors can be present in any age group and develop in any part of the human body, composing a heterogeneous group with more than 100 subtypes of neoplasms[2]. Based on the low prevalence of these tumors and the differential diagnosis with other emergency surgical pathologies, we chose to report this case.

CASE REPORT

LFG patient, female, 65 years old, complained of pain and bulging in the medial aspect of the right thigh started about 1 week ago, associated with an isolated febrile peak. Report of low back pain with irradiation to the ipsilateral lower limb in the last month, with no significant findings during orthopedic evaluation.

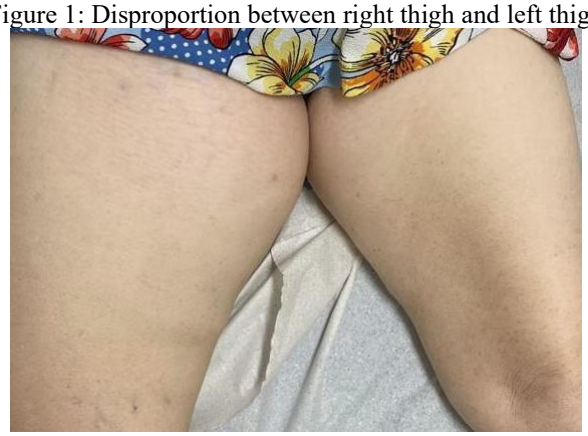
Physical examination revealed a painful bulge of about 12 cm in diameter on the medial aspect of the right thigh, associated with local heat, with no other findings.

However, there were no significant findings on laboratory tests, however, on US and CT scans, a large intramuscular expansive lesion was found in the right thigh, with an apparent origin near the heterogeneous adductor muscles, with cystic/necrotic areas in between, with partially circumscribed borders, with heterogeneous contrast enhancement, measuring approximately 13.8 x 8.8 x 13.0 cm. No signs of bone invasion. Associated with edema and densification of the subcutaneous tissue of the region.

An incision was made at the affected site to drain the collection, showing clots associated with a fibrous capsule in the middle and persistent bleeding during tissue resection.

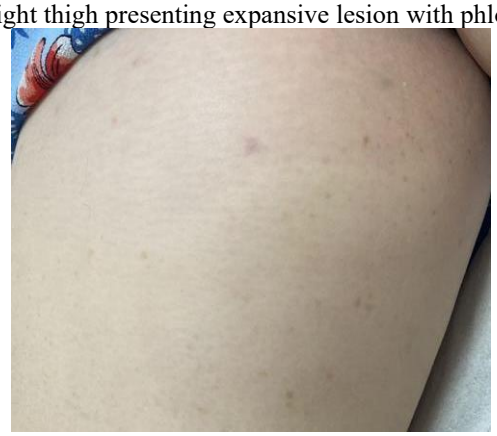
The patient had a good clinical evolution and was discharged from the hospital after 1 day postoperatively, with outpatient follow-up where the patient and companion were informed of the anatomopathological result, which showed mesenchymal malignant neoplasm compatible with high-grade sarcoma (high mitotic index) associated with hematoma and referral to the referral service for oncological treatment.

Figure 1: Disproportion between right thigh and left thigh



Source: The authors collection.

Figure 2: Right thigh presenting expansive lesion with phlogistic signs



Source: The authors collection.

DISCUSSION

Soft tissue sarcomas are a group of pathologies that, despite their low prevalence in Brazil, have a high potential for fatal outcomes and can progress to metastatic disease in up to 50% of cases and, of these, about 80% will progress to death within 2 years[1]. These tumors have diverse clinical presentations, and may develop superficially or deeply into the tissues, evolve slowly or quickly, and be painless or even extremely painful, making early diagnosis and treatment even more difficult[3].

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