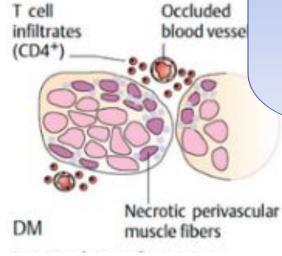
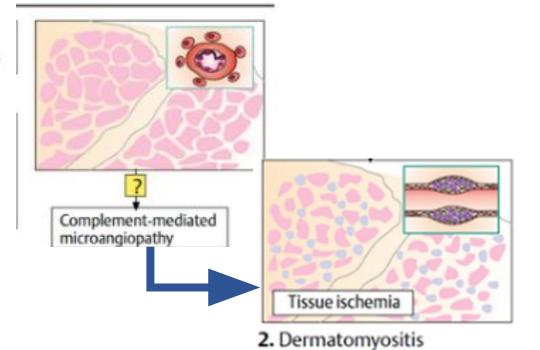
Dermatomyositis as a risk factor of carcinogenesis- case report

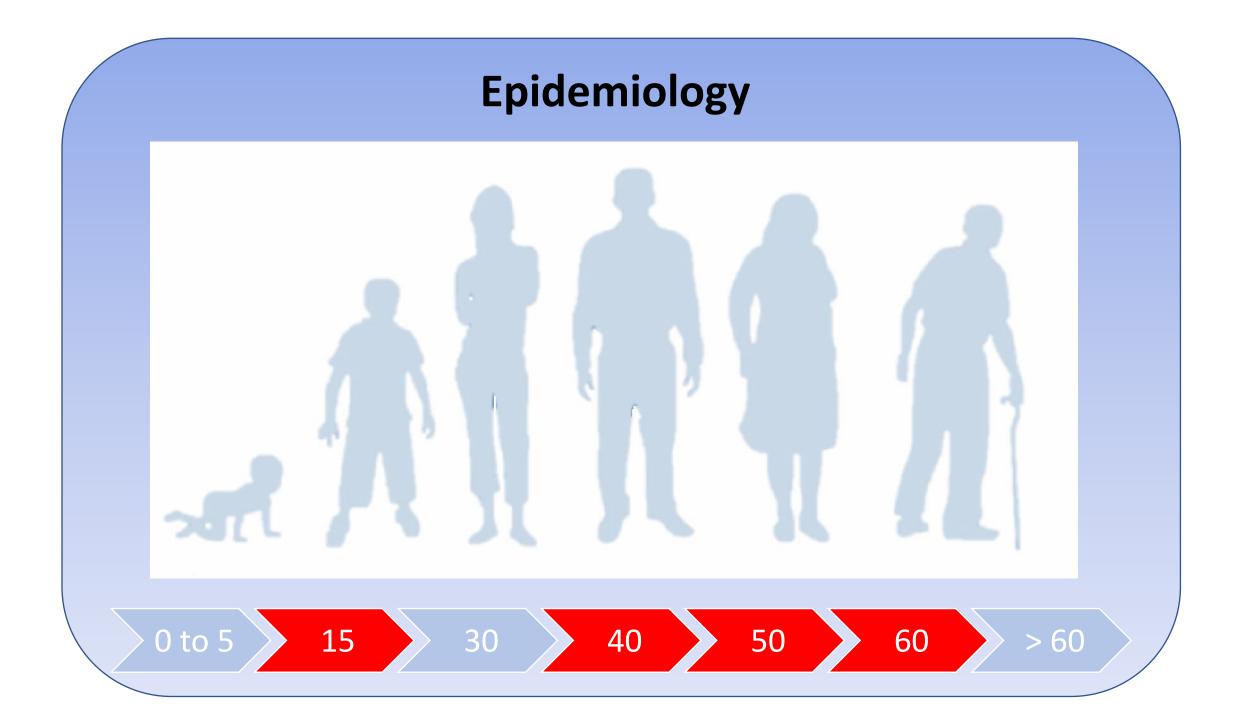
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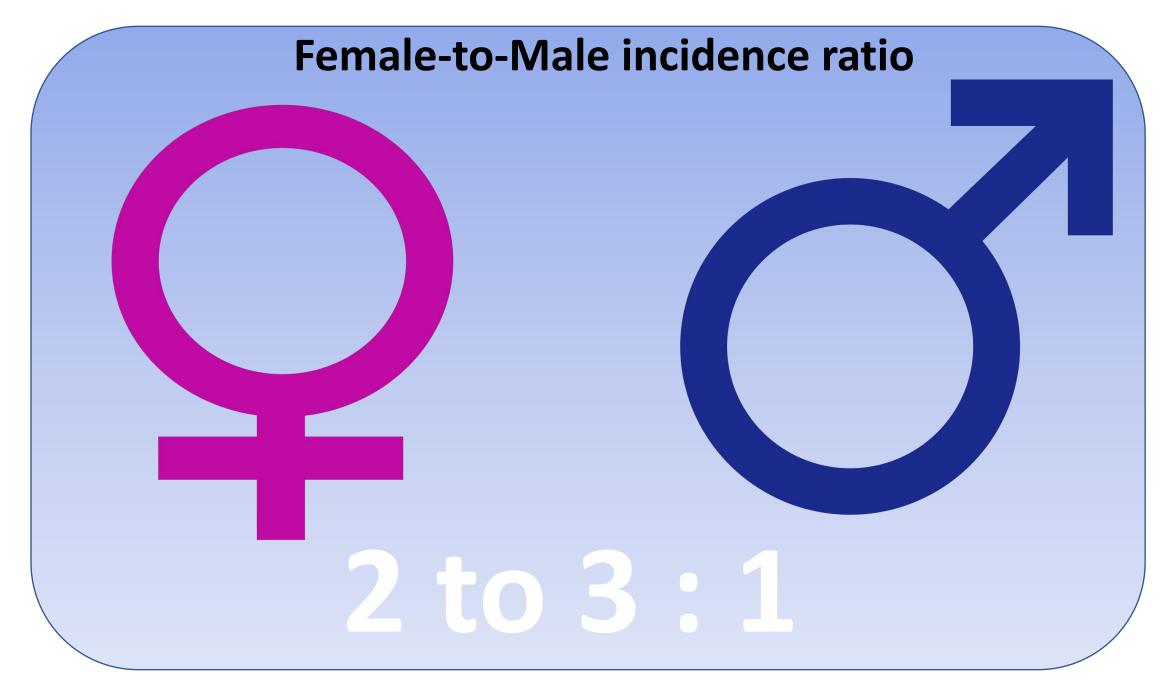
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Dermatomyositis (DM)
is an idiopathic inflammatory myopathy
involving proximal muscle weakness and
non-suppurative skeletal muscle
inflammation









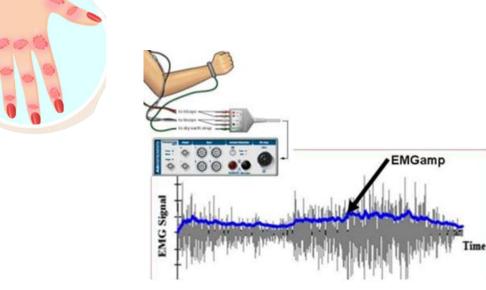
The most commonly used criteria

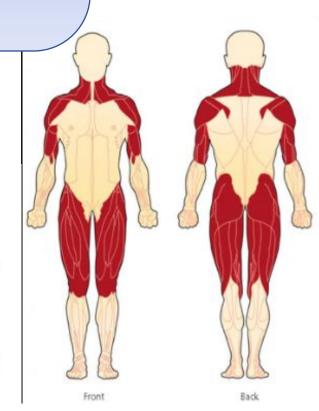
- 1. Symmetric proximal muscle weakness
 - 2. Elevated serum muscle enzymes
- 3. Myopathic changes in electromyography (EMG)
 - 4. Characteristic muscle biopsy abnormalities

5. Typical rash



Shawi Sign



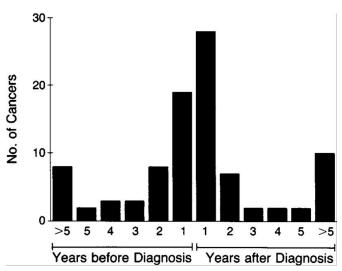


INCREASED RISK OF CANCER

- 1. Patients with DM must be monitored closely for potential malignancies, as there is an increased risk of cancer, particularly within the first 5 years after symptom onset
- 2. The most common cancers seen in patients with DM include

breast
colon
lung
ovarian
melanoma
non-Hodgkin lymphoma (NHL)
nasopharyngeal
stomach

- 3. The overall cancer rate in patients with DM varies between **9% and 32%.**
- The highest risk of developing cancer in patients with DM is within the first year of onset of myositis
- 5. Dermatomyositis as a paraneoplastic syndrome may precede symptoms and diagnosis of cancer or develop in advanced cancer process



Temporal Relation between the Diagnosis of Dermatomyositis and the Diagnosis of Canal

https://www.nejm.org/doi/full/10.1056/nejm199202063260602



CT scan: chest, abdomen, pelvis



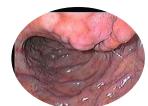
CA 125 CEA CA 19-9 CA 15-3 AFP HCG



mammography



cytology



colonoskopy, gastroscopy



monoclonal protein

Case report

- 49 year old ,female patient diagnosed with DM in 2016
- Early symptoms were:
 - rash on the face and eyelids,
 - Gottron sign,
 - proximal muscle weakness,
 - difficulties with deglutition and speech.
- In the family: endometrial cancer (mother),
 digestive track cancer (2 brothers)

The most commonly used criteria

- 1. Symmetric proximal muscle weakness 🕂
 - 2. Elevated serum muscle enzymes 💠
- 3. Myopathic changes in electromyography (EMG)
 - 4. Characteristic muscle biopsy abnormalities +5. Typical rash +

SKIN SYMPTOMS





TREATMENT

Ciclosporin
Chloroquine
Methylprednisolone
Azatriopryne
Mycophenolate mofetil

no long-term remission



excerebration of the disease

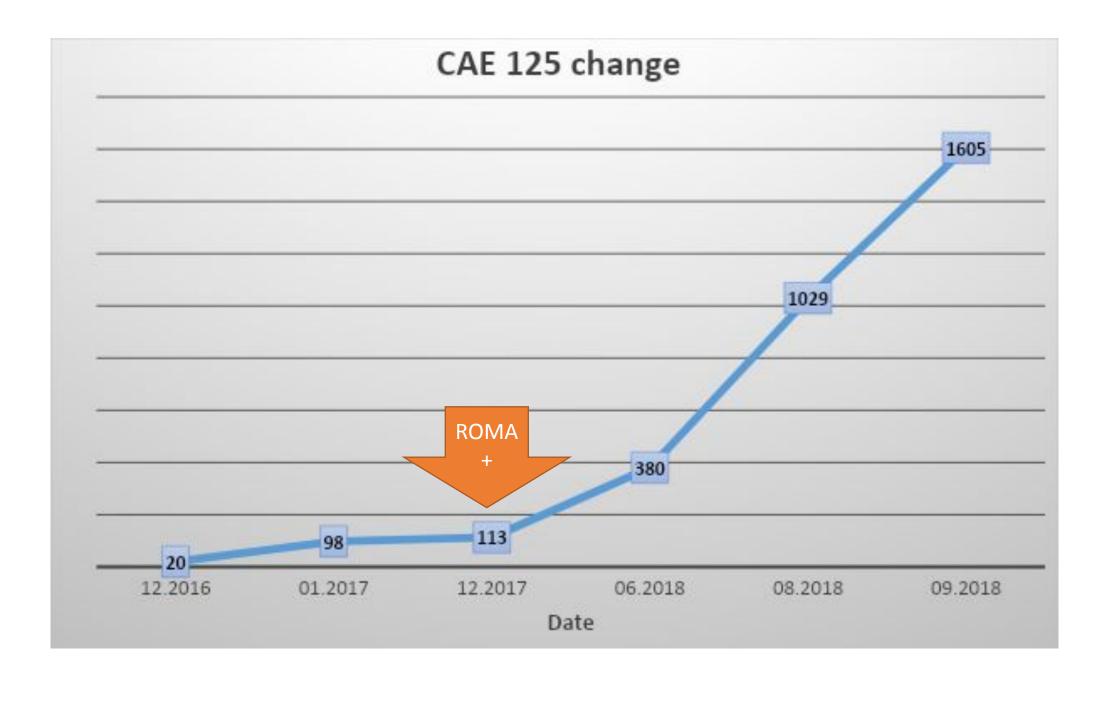


steroids iv in high doses

Course of a disease

2017

- CA-125 value increased, test ROMA +
- USG: thickening of endometrium
- ↑ Aldolase
- Autoantibodies -



Increased CA-125 value



Gynecological consultation

Oncological consultation



Diagnostic laparoscopy

2018

- Laparoscopic removal of both fallopian tubes and right ovary
- Low differentiated serous cancer infiltrating parts of fallopian tube, connective tissue and surrounding fatty tissue was discovered

SEROUS FALOPIAN TUBE CANCER

DECISION ABOUT
COMPLETE REMOVAL OF REPRODUCTIVE ORGANS

CONCLUSION

- Dermatomyositis can be a risk factor of carcinogenesis
- It is important to pay attention to possibility of cancer development
- Patients should be under careful medical supervision

Bibliography

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