Rare Malignant Peritoneum Mesothelioma Masquerading with Respiratory Manifestation

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Introduction

- Mesothelioma is a rare and aggressive cancer that affects the linings of the pleura, peritoneum and pericardium.
- Pleural involvement is however most common. Malignant Peritoneal mesothelioma (MPM) is a cancer developing in the lining of the peritoneum, which is extremely rare.
- Most MPM cases are caused by asbestos exposure. Common symptoms of MPM include abdominal distension, abdominal pain, swelling or tenderness and constipation or diarrhea, with most common being abdominal swelling.
- MPM is difficult to diagnose due to its vague, nonspecific symptoms.

Case Presentation/Clinical Course

- 67-yo-Male presented to the ER with complaint of Shortness of Breath for 6 weeks and dry cough.
- Pt was treated as an outpatient with bronchodilator, steroid and 2 rounds of antibiotics with no relief.
- Pt also had poor appetite, unexpected 10 lb weight loss and generalized weakness.
- CT abdomen & pelvis subsequently asserted it with likely malignant diagnosis.
- Surgical biopsy confirmed mesothelioma of the peritoneum. Patient denied any exposure to asbestos, but had worked in construction his entire adult life.
- Oncology offered palliative chemotherapy, which he refused. Follow-up CT Abdomen 1 month later showed progressive MPM. With rapidly worsening disease, no chemotherapy and overall poor prognosis, patient elected comfort care.
- Unfortunately, he succumbed to his fatal diagnosis within 2 months on hospice care.
- Early on, patient was treated as cough variant asthma.
- But without improvement, further evaluation was carried out leading to incidental unexpected abdominal findings on CT Chest.
- Further workup with concluding biopsy confirmed MPM.

Imaging

- Figure A: Enhanced Axial view of MPM on Abd/Pel CT.
- Figure B: Enhanced Coronal view of MPM on Abd/Pel CT.
- Figure C: MPM Pathology biopsy confirming MPM.

Discussion

- Patient presents with a rare presentation of a rare disease, MPM where patient presented with atypical respiratory symptoms.
- Generally, abdominal symptoms are common to present.
- Due to rarity and short life expectancy, MPM does not have set staging system.
- Early and timely diagnosis aids rearranging goals of care in such instances.
- In terminal illnesses, quality of life with timely discussion of comfort care is crucial.
- With red flag symptoms, like rapid weight loss in this case despite atypical presentation, should warrant careful evaluation as it could change goals and treatment plans substantially.
- However, it can offset the balance for high value care at times.
- We hope that future medical advances will bridge this disparity positively for rare cases also.

References
