Port Site Metastasis Following Laparoscopic Right Hemicolecotomy

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Figure 1: PET scan showing abdominal wall metastasis.
Figure 2: Cutaneous metastasis with skin puckering.
Figure 3: Intraperitoneal view of metastasis.
Figure 4: Excised specimen.

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Abstract

**Purpose:** The Incidence of port site metastasis in a laparascopic colorectal cancer surgery is rare. We present a case of abdominal wall metastasis at the site of specimen retrieval after a follow up of 18 months after laparascopic right hemicolecotomy for carcinoma caecum; The images of port site metastasis has been attached in the article

**Method:** The details of the patient was analysed retrospectively through the old surgical notes and electronic medical database at Amrita Institute of Medical Sciences, Kochi, Kerala, India.

**Keywords:** Laparascopic colorectal surgery; Port site metastasis

**Case Presentation**

A 67 year old patient underwent laprascopic right hemicolecotomy for carcinoma caecum in the month of January 2014; he had a good postoperative recovery. Histopathology showed well- differentiated carcinoma caecum T3N1M0 and patient received 4 cycles of adjuvant chemotherapy and was on regular follow up. In 2015 October, in view of elevation of CEA from 2.3 to 9, PET scan was done that showed evidence of abdominal wall metastasis (Figure 1) with incisional hernia at specimen extraction site with no other evidence of recurrence. The patient underwent excision of abdominal wall metastasis along with incisional hernia repair. On follow up, patient is doing well with CEA below (Figures 2-4).

**Conclusion**

Port site metastasis in laprascopic colorectal surgery is still a possibility; hence appropriate measure needs to be taken to prevent contact of tumour to the skin during its extraction.