Virchow’s Node in a Different Presentation

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\textbf{ABSTRACT}

Gastroesophageal(GI) malignancies are among the common malignancies in the world. Many patients come to clinical centers with signs and symptoms of metastasis. It is essential to know different presentations of metastasis. One of the most important sites of GI metastasis is the lymph node present as Virchow's node.

1. Introduction

Colorectal cancer is the third most common cancer globally.\textsuperscript{[1]} One of the most famous sites of this cancer's metastasis is lymph nodes.\textsuperscript{[2]} Because of superficial location and easy examination, Virchow's node is one of the most important sites. Enlargement of this node can be an essential clue of gastrointestinal (GI) malignancies. It can also manifest non-GI malignancies like lymphoma, breast, esophageal, pelvic, and testicular cancers.\textsuperscript{[3]}

2. Case presentation

A 51-year-old male presented to our hospital with fever, chills, myalgia, icterus, nausea and vomiting from 40 days before admission. He also complained of intermittent rictorrhagia and an erythematous node (8*7 cm) in the left supraclavicular area [Figure 1] with mild pain and a scant amount of yellow discharge. He also had persistent pain in the right upper quadrant since ten days ago, bilateral swelling of lower limbs, and over 9kg weight loss.

Figure 1- Patient with swollen left supraclavicular lymph node.

Regarding the signs and symptoms of infection of the node, the first differential diagnosis was the node's abscess. Colonoscopy of the sigmoid colon revealed an infiltrative and ulcerative tumor in favor of colon cancer.

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Further study by abdominal sonography showed an enlarged liver with infiltration and several hyperechoic areas with hypoechoic cores. Besides, histologic examination of supraclavicular core needle biopsy was compatible with metastatic adenocarcinoma.

Conflict of Interest
The authors declared that there is no conflict of interest.

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