Metastatic colorectal carcinoma and kidney tumors: a report of four cases

Bohuslav Melichar^{1,2,6}, Petr Morávek³, Alexander Ferko⁴, and Miroslav Podhola⁵

¹Department of Oncology, Palacký University Medical School Teaching Hospital, Olomouc, and Departments of ²Oncology and Radiotherapy, ³Urology, ⁴Surgery, ⁵Pathology, and ⁶Institute of Experimental Neurosurgery, Charles University Medical School Teaching Hospital, Hradec Králové, Czech Republic

ABSTRACT

Aims and background. The prognosis of patients with metastatic colorectal carcinoma (CRC) has improved substantially over the last two decades. Longer patient survival comes at a price of more complications, including second primary neoplasms and metastases at unusual sites.

Method. Retrospective chart review.

Results. We present 4 patients with metastatic CRC who developed kidney tumors. In 2 cases, partial nephrectomy or nephrectomy was performed for second primary renal cell carcinoma. The patients survived 2.5 and more than 6 years after kidney surgery. In the other 2 patients the kidney tumors were diagnosed as CRC metastases, histologically verified in one case; these two patients died within two years of diagnosis of kidney involvement.

Conclusion. The diagnostic approach to kidney tumors in CRC patients should include a biopsy because only patients with primary renal cell carcinoma and selected patients with metastatic CRC benefit from nephrectomy. Free full text available at www.tumorionline.it

Key words: colorectal carcinoma, renal cell carcinoma, nephrectomy.

Acknowledgments: The study was supported by Research Project MZO 00179906.

Correspondence to: Bohuslav Melichar MD, PhD, Professor and Head, Department of Oncology, Palacký University Medical School and Teaching Hospital, I.P. Pavlova 6, 775 20 Olomouc, Czech Republic. Tel +420-588-444288; fax +420-588-442522; e-mail bohuslav.melichar@fnol.cz

Received July 3, 2009; accepted November 17, 2009.