

Gender: Female

Age: 38

MRN: 822340

Diagnosis: Cholangiocarcinoma

History and Physical:

First Visit (24/09/24)

Patient:

Doctor, I've been feeling quite unwell lately. I've had anorexia and a low-grade fever. Also, I had a cholecystectomy on 11/11/23 and 12 sessions of chemotherapy for adenocarcinoma of the pancreas, which I completed on 15/05/24.

Doctor:

I see. You've had a biopsy on 8/6/24, which showed moderately differentiated adenocarcinoma of the pancreatic mass. You also had a CT scan on 5/9/24, which showed a fairly defined lobulated mass in the pancreas, with involvement of the head, neck, and uncinate process. The mass is compressing and stretching the SMV, and there's also marked intrahepatic cholestasis. I also noticed partial encasement of the IVC.

Patient:

Yes, that sounds like the situation. The CT also mentioned that I have some lymphadenopathy and a mass at the upper abdomen.

Doctor:

Right. Your lab results from 6/9/24 show:

Total Bilirubin: 8

ALT: 84

ALP: 236

It seems you're not on any medications currently, and you don't have any significant past medical or surgical history other than the cholecystectomy.

Patient:

Yes, that's right.

Doctor:

Based on this, you have biopsy-proven adenocarcinoma of the pancreas with locally advanced disease and high bilirubin levels. Here's what we'll do:

We'll carry out all baseline investigations, including CA 19-9, which is 38.5, and schedule a triphasic CT scan.

You may need an ERCP for decompression of the biliary system.

I'll refer you to the ER for admission.

Patient:

Okay, Doctor. Thank you.

Follow-up Visit (10/10/24)

Patient:

Doctor, Ive been feeling worse since my last visit. I still have jaundice and have been feeling quite nauseous with loss of appetite.

Doctor:

I understand. Youre a known case of biopsy-proven adenocarcinoma of the pancreas with duodenal infiltration. Youve completed 14 chemotherapy sessions, the last one was three months ago. How are you feeling now?

Patient:

Ive been very tired, and I still have some mild tenderness around the PTC site. The jaundice hasn't improved much, and I also have some drainage from the site about 300ml in 24 hours.

Doctor:

I see. Let me go over your recent investigations. On 26/09/24, during the ERCP, a large, ulcerated tumor mass was found in the ampullary region. There was some self-limiting bleeding, and unfortunately, we couldnt take a biopsy because of the friable mucosa. We will refer you for percutaneous transhepatic cholangiography.

Patient:

That sounds concerning.

Doctor:

Yes, I understand. The endoscopy on 30/09/24 revealed a large, infiltrating, ulcerated mass in the duodenum. We took biopsies for histopathology. The result from 04/10/24 confirmed poorly differentiated adenocarcinoma with a pancreaticobiliary origin.

Also, your CT scan on 24/09/24 showed a hypo-enhancing, irregularly margined mass involving the pancreas, infiltrating the second and third parts of the duodenum. This mass is abutting major vessels like the portal vein, SMV, IVC, and GDA, and it's causing biliary dilatation.

Patient:

What does that mean for me, Doctor?

Doctor:

It suggests locally advanced adenocarcinoma of the pancreas with significant lymphadenopathy.

Your current lab results from 01/10/24 show:

Bilirubin: 4.48

ALT: 27

AST: 44

Albumin: 4.0

Creatinine: 0.41

Na: 128

K: 4.04

Hb: 8.7

WBC: 12.08

Platelet: 569

INR: 1.21

CA 19-9: 922.6

These indicate liver involvement and elevated tumor markers.

Patient:

Thats a lot of information. Whats the next step?

Doctor:

We'll discuss your case in the multidisciplinary team (MDT) meeting tomorrow regarding potential resection. I will also refer you to the HPB team for a surgical review. After the MDT, we'll update you on the treatment plan.

Follow-up Visit (11/10/24)

Patient:

Doctor, I've been struggling with jaundice and anorexia for the past month. I'm worried about the next steps.

Doctor:

You've had extended cholecystectomy for gallbladder mass on 11/11/23, and the biopsy showed well-differentiated adenocarcinoma of biliary type. Your pancreatic adenocarcinoma is now involving

the duodenum. Youve had 14 chemotherapy sessions, with the last one done three months ago.

Patient:

Yes, Ive been feeling quite weak. What do the doctors think about my situation?

Doctor:

The most recent findings show recurrence and residual disease involving both your gallbladder and pancreas. Your lab results are still concerning:

Bilirubin: 4.48

ALT: 27

AST: 44

Albumin: 4.0

Creatinine: 0.41

WBC: 12.08

Platelet: 569

INR: 1.21

CA 19-9: 922.6

Your BMI is 18, indicating significant weight loss.

Patient:

Whats the next plan, Doctor?

Doctor:

Well proceed with a PET scan. If the disease is localized, surgery may be an option, although theres a risk of recurrence. Well also continue with neoadjuvant chemotherapy.

Patient:

Thank you, Doctor. I appreciate the updates.

MDT Outcome (18/10/24)

Clinical Coordinator:

We have discussed the patients case in the MDT. The next step is to proceed with a PET scan. The outcome was communicated to the patient's husband, Ijaz Hussain, and they were informed by Zubair Ali, Clinical Coordinator.

Lab Results Summary (01/10/24):

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