

Cranial metastasis as initial manifestation of hepatocellular carcinoma

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Abstrak

Cranial metastasis from hepatocellular carcinoma (HCC) prior to diagnosis of the primary tumor without liver dysfunction is a very rare event. Cranial metastasis may be the sole initial presentation of HCC. Early diagnosis is essential in order to treat the primary disease. Cranial metastasis from HCC should be considered in the differential diagnosis in patients with subcutaneous scalp mass and osteolytic defects on X-Ray. A 55 year old female patient without known liver disease, presented with a palpable right occipital scalp mass. On head computed tomography (CT) scan, a tumor on right orbita wall, osteolytic skull and invasion to the right frontal lobe was observed. The histological diagnosis obtained from the biopsy was a poorly differentiated cranial metastasis adenocarcinoma that was difficult to determine the origin. On positron emission tomography (PET) scan, there was a hypermetabolic mass around intra hepatic bile duct which suspicious primary cancer. The histological diagnosis obtained from the liver biopsy was appropriate with HCC grade II. The metastatic tumor was removed via occipital craniectomy. She received a palliative course of external beam radiation therapy to the right orbit. Then, she received symptomatic treatment and herbal medicine with cassava leaves for the last three months. Evaluation of bone survey shows lytic lesion at calvaria and compression fracture at vertebrae thoracic 11-12 appropriate with metastasis process. According to Barcelona clinic liver cancer (BCLC) criteria she suffered from HCC terminal stage D with average survival of about 4 months.