A Case Of Extraskeletal Ewing's Sarcoma In Adult Patient

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INTRODUCTION:

Extraskeletal Ewing sarcoma (EES) is a relatively uncommon primary tumor of the soft tissues, which accounts for 20-30% of all reported cases of ES. EES is a rapidly growing mass that causes localized pain. However, limited literature exists examining treatment strategies due to rarity of the disease.

REPORT:

A 58-year-old woman presented with right first toe hallux swelling and pain for 6 months. Over two months, the swelling grew and became ulcerated and more painful. No trauma or insect bites were reported. No constitutional symptoms or family history of malignancy.

A 3x4cm fungating and ulcerated swelling from the base and medial side of the right first toe extends laterally into the first webspace on physical examination with contact bleeds. Xrays show no bone erosion.

Patient underwent wide local excision with the first Rays amputation of the right foot. The swelling ruptured and bled on the day before the operation.

A microscope investigation of tumor cells shows myxoid stroma and small oval to round pleomorphic vesicular nuclei with coarse chromatin and necrosis (<50%). Immunohistochemistry supports morphological features: CD99 and Fli-1 positivity favors Extraskeletal Ewing/PNET. The soft tissue and bone margins are malignancy-free.

Following surgery, the wound was clean, and pain symptoms improved. The staging CT scan and bone scan revealed no further bone and distant metastases. After discussion with the oncologist, the decision was taken to provide chemotherapy as recommended by the NCCN.



Figure 1: right foot (A) on admission and the lesion self-ruptured before surgery (B)



Figure 2: intraoperative picture

CONCLUSION:

Although rare, a fast developing protrusion that initially resembles an infection may be a tumor. To ensure timely management, further investigation is needed when suspicions arise.

REFERENCES:

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