



## Image of the Month

Choroidal metastasis from gastric adenocarcinoma: A rare case<sup>☆</sup>Yongquan Yu<sup>a</sup>, Hongsheng Zhang<sup>a</sup>, Shujing Xing<sup>b</sup>, Jie Liu<sup>a,\*</sup><sup>a</sup> Department of Radiology, WeiHai Central Hospital, China<sup>b</sup> Department of Oncology, WeiHai Central Hospital, China

A 40-year-old woman was referred to our hospital with a cardinal symptom of blurred vision in the right eye. Fundus photography was performed and revealed an amelanotic mass with retinal detachment, suggesting the presence of a choroidal tumor. As radiologists, we recommended further magnetic resonance (MR) examinations to determine the cause of her complaints. A smooth and sharply marginated tumor was detected in her right choroid in T1-weighted images (T1WI) and T2-weighted images (T2WI). The lesion showed a degree of hyperintensity in contrast-enhanced

MR imaging. Specifically, the lesion presented as hypointense and isointense areas in T1WI and T2WI respectively, which confirmed our preliminary diagnosis of a metastatic tumor rather than a melanoma. An endoscopy discovered the presence of gastric adenocarcinoma, even though the patient did not present with any symptoms of pain or discomfort in her stomach. Her only initial symptom was blurred vision, which almost obscured the possibility of gastric cancer. On the basis of diagnosis, the patient underwent six cycles of chemotherapy (capecitabine and oxaliplatin) upon our prescription and later was re-examined after its completion. As a result, contrast enhanced MR imaging confirmed that the choroidal lesions had disappeared and that our treatment was successful (Fig. 1).

Metastasis of gastric cancer to the eyeball, particularly the choroid, is extremely rare [1]. Magnetic resonance imaging is able to rule out the possibility of melanoma before treatment as melanoma is characteristically hyperintense on T1WI. This further emphasizes the superiority of MR over other examinations.

**Conflict of interest**

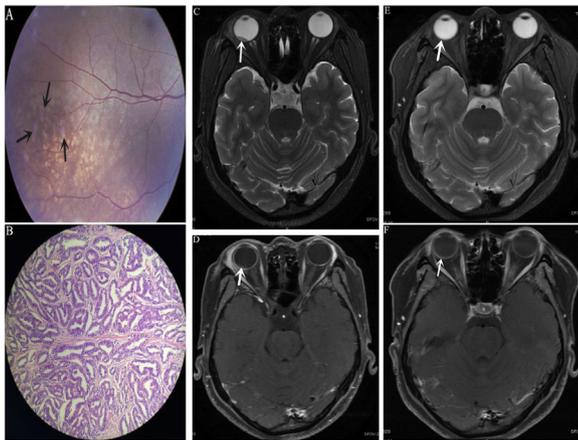
None declared.

**Ethical statement**

The study was approved by the ethics committee of WeiHai Central Hospital and written informed consent to publish the material was obtained from the patient.

**Reference**

- [1] Masanari S, Susumu A, Hiroaki S, et al. Solitary choroidal metastasis from gastric adenocarcinoma: a case report. *Surg Case Rep* 2017;3(December (1)):35.



**Fig. 1.** A The Fundus photograph shows multiple obvious choroidal masses with exudative retinal detachment and no abnormal pigmentation (black arrows). B. Photomicrograph of a histological specimen indicates a moderately differentiated adenocarcinoma (hematoxylin-eosin staining, original magnification  $\times 20$ ). C&D. An elevated choroidal tumor is observable in the choroid of the right globe. The T2-weighted image is isointense and the T1 contrast MRI shows an enhanced hyperintense lesion (white arrow). E&F. The T2-weighted image and T1 contrast image shows that the lesions originally located in the right choroid disappeared after standard chemotherapy (white arrow).

<sup>☆</sup> The work should be attributed to WeiHai Central Hospital.

\* Corresponding author at: Department of Radiology, WeiHai Central Hospital, No. 3, East-Mishan Road, Wendeng District, Weihai 264400, China.

E-mail addresses: [yuyongquan.511@163.com](mailto:yuyongquan.511@163.com) (Y. Yu), [352804869@qq.com](mailto:352804869@qq.com) (H. Zhang), [0631.8789708@163.com](mailto:0631.8789708@163.com) (S. Xing), [15063112734@139.com](mailto:15063112734@139.com) (J. Liu).