

# Rare metastatic location of a primary cutaneous melanoma

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Sir,

Pancreatic metastases from primary cutaneous melanoma are rare, in the order of 2–5%, exceptionally diagnosed when the patient is alive. Herein, we report two new observations.

A 66-year-old patient, followed for a right plantar acrolentiginous melanoma at the metastatic stage at the lymph node and pulmonary level, was readmitted in a picture of cholestatic jaundice and clinical aggravation (Figs. 1a and 1b). A cerebro-cervical-thoraco-abdomino-pelvic CT scan revealed a tissue mass of the head of the pancreas measuring 65 x 50 mm (Fig. 2). The diagnosis of a secondary location was confirmed by the radiologists. Given his multivisceral involvement, the patient was referred to oncology for further management.

A 57-year-old patient, followed for a right plantar acrolentiginous melanoma at the metastatic stage (Fig. 3), having benefited from a lymph node curage with chemotherapy, was readmitted for clinical worsening and installation of new skin metastases. A cerebro-cervical-thoraco-abdominopelvic CT scan revealed a tumor of the head of the pancreas measuring 48 mm, associated with other secondary pulmonary and adrenal localizations. The patient was lost to follow-up.

Melanoma usually metastasizes to the lymph nodes, liver, lungs, or brain. Pancreatic metastases are rare, occurring between 2% and 5%, with 76 cases having been described in the literature [1]. Most come from the kidney, lung, or breast [2]. They present with cholestatic jaundice, abdominal pain, and weight



Figure 1: a) Frank cholestatic icterus. b) Plantar ulcerative tumor.



Figure 2: Abdominal CT scan revealing a tissue mass of the pancreatic head.

loss. Endoscopy is indicated for gastrointestinal symptoms.

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**Figure 3:** Plantar ulcerative tumor.

Eighty-five percent of pancreatic metastases are incidentally discovered on imaging at an inoperable advanced stage [3]. The choice of treatment should take into account life expectancy, the performance index of the WHO, and the number of metastases. For multivisceral involvement, surgery remains a palliative treatment to relieve symptoms and improve quality of life [3]. Melanoma remains an aggressive malignancy due to its rapid and significant metastatic potential. Although pancreatic metastases are rare, early diagnosis by imaging is crucial.

## Consent

The examination of the patient was conducted according to the principles of the Declaration of Helsinki.

The authors certify that they have obtained all appropriate patient consent forms, in which the patients gave their consent for images and other clinical information to be included in the journal. The patients understand that their names and initials will not be published and due effort will be made to conceal their identity, but that anonymity cannot be guaranteed.

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