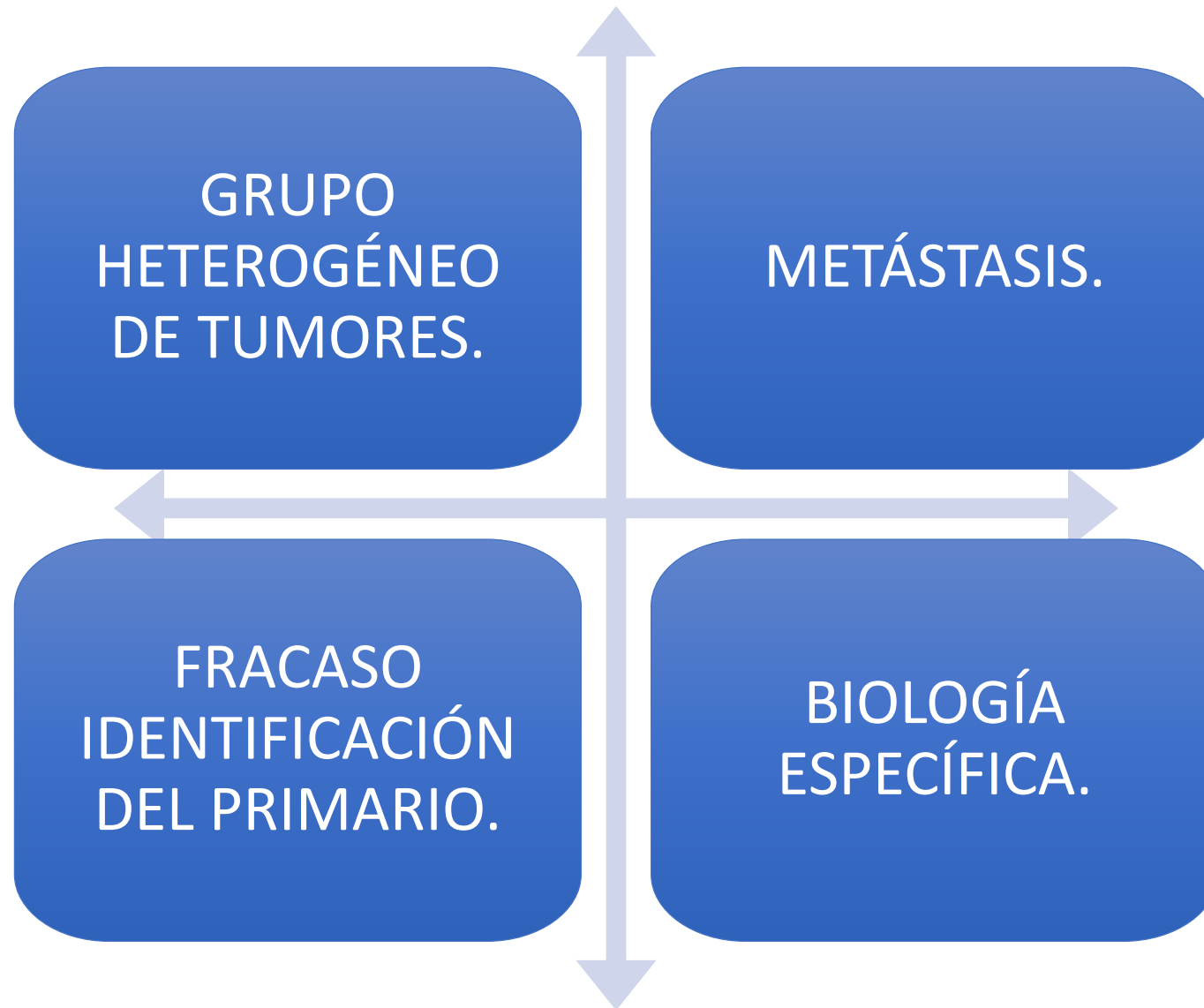


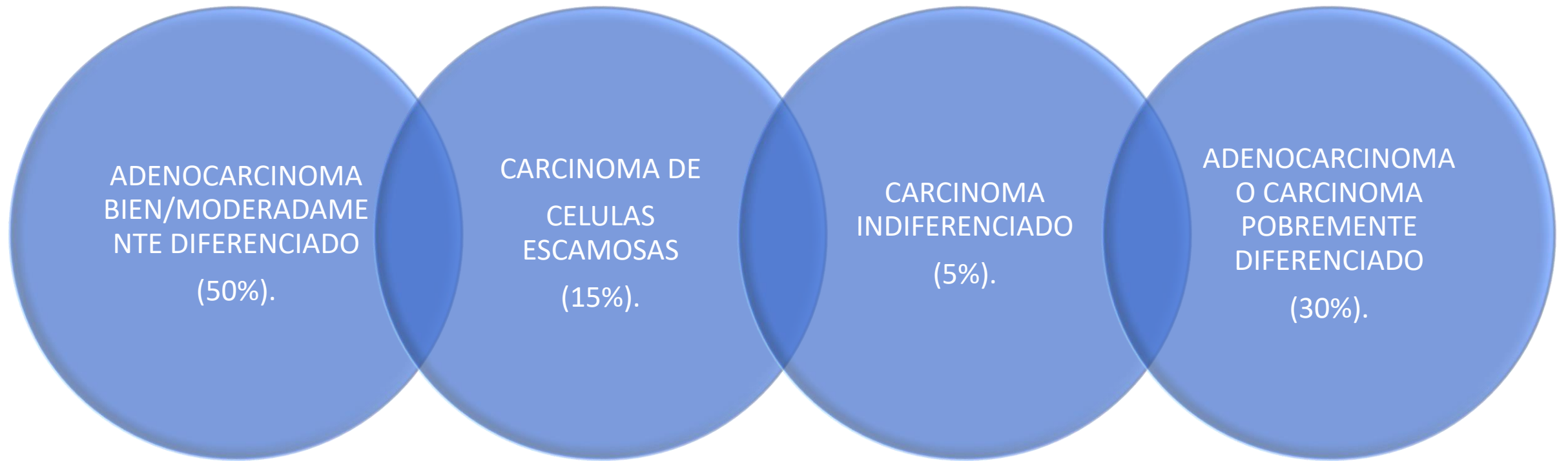
ESTUDIO DEL CÁNCER DE ORIGEN DESCONOCIDO

JORGE ALBERTO FONG GUTIERREZ
ONCOLOGÍA MÉDICA
R1

DEFINICIÓN



DIAGNÓSTICO



ADENOCARCINOMA
BIEN/MODERADAMENTE
DIFERENCIADO
(50%).

CARCINOMA DE
CELULAS
ESCAMOSAS
(15%).

CARCINOMA
INDIFERENCIADO
(5%).

ADENOCARCINOMA
O CARCINOMA
POBREMENTE
DIFERENCIADO
(30%).

SOBREVIVENCIA

Cuarta causa mundial de muerte por cáncer.

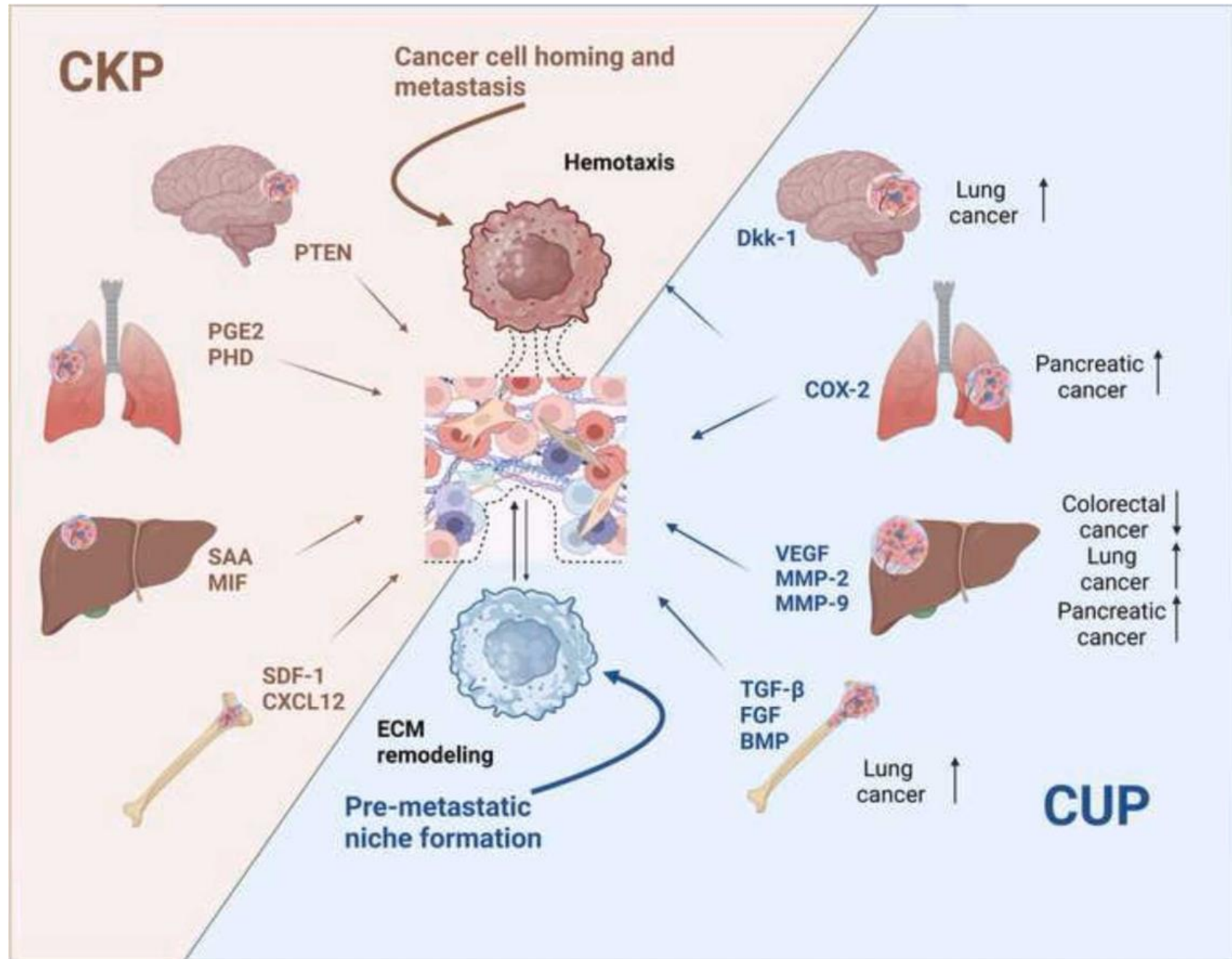
Pico de incidencia entre 60-70 años.

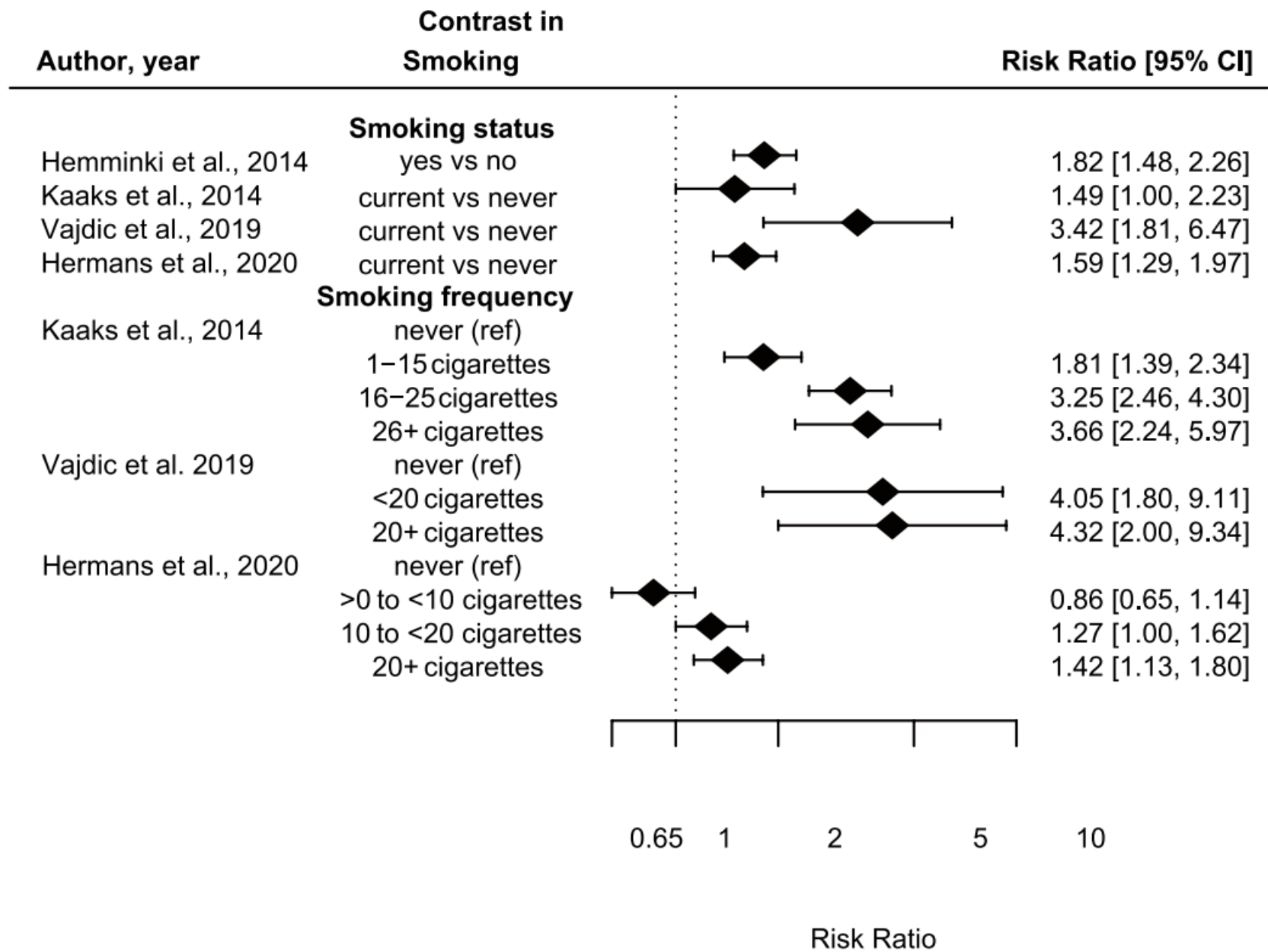
Supervivencia global de 2.7 a 11 meses.

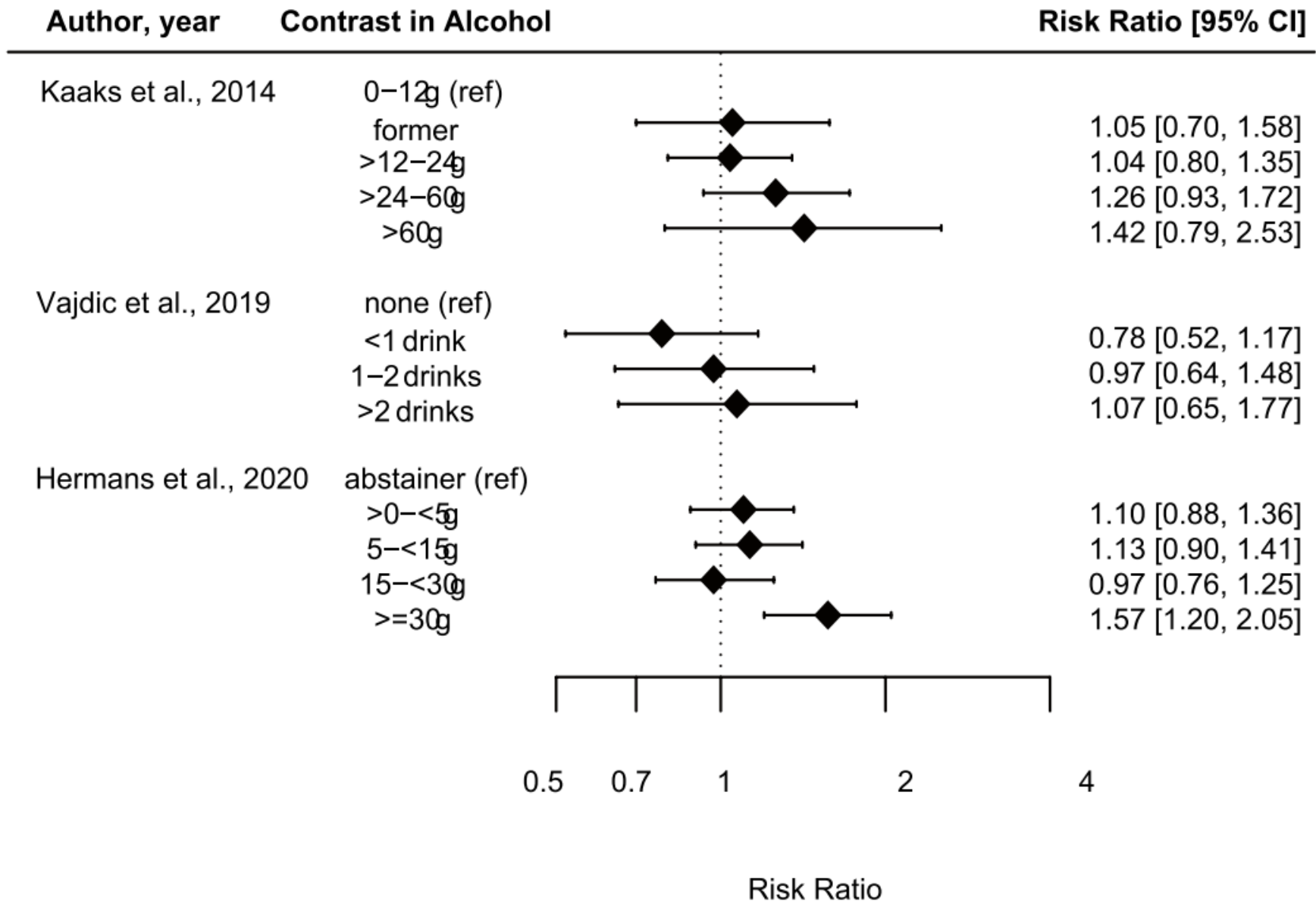
15-20% alcanzan el año de vida.

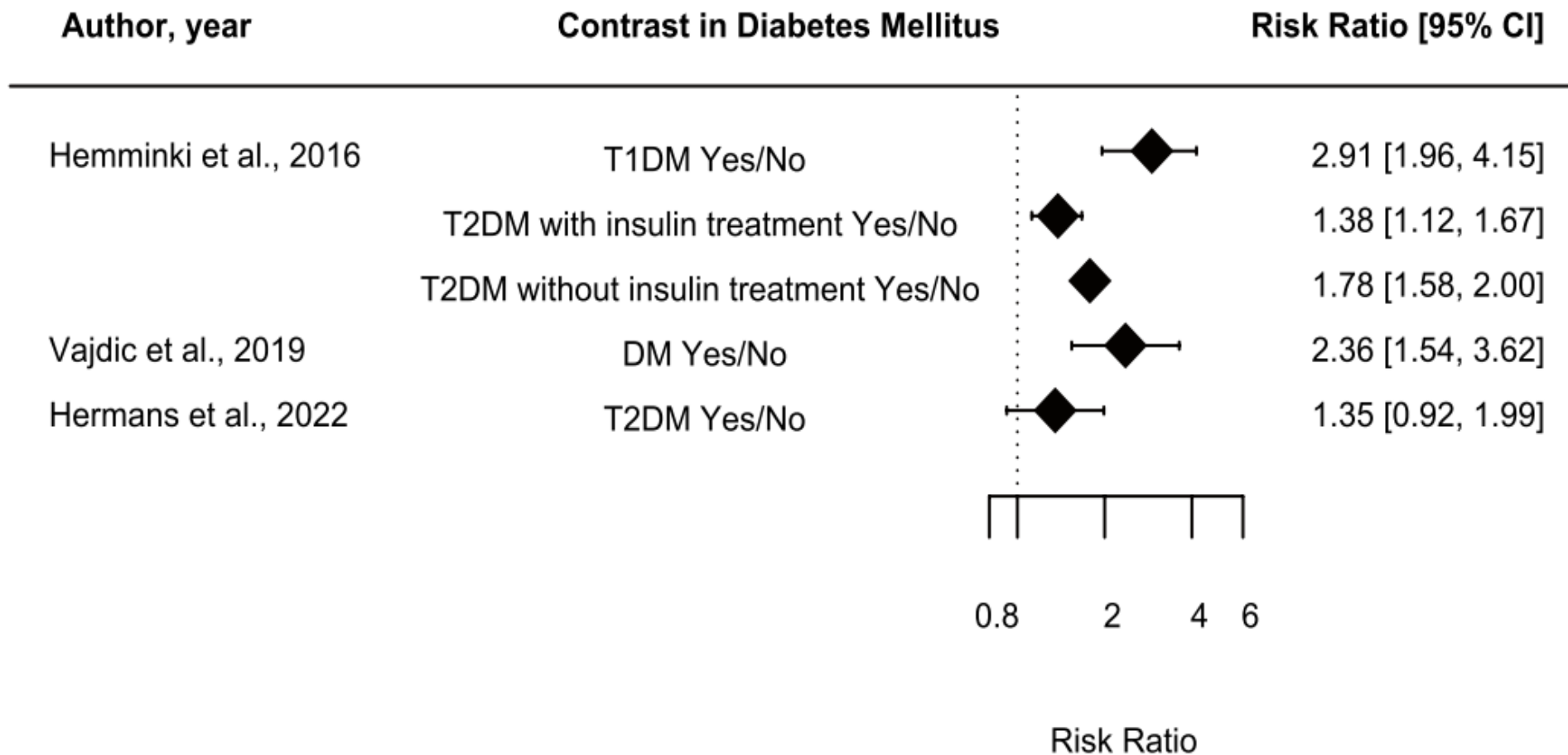
22-23% pronostico favorable.

PATOGENESIS









AUTOINMUNIDAD.

PREDISPOSICIÓN FAMILIAR.

ÍNDICE DE MASA CORPORAL.

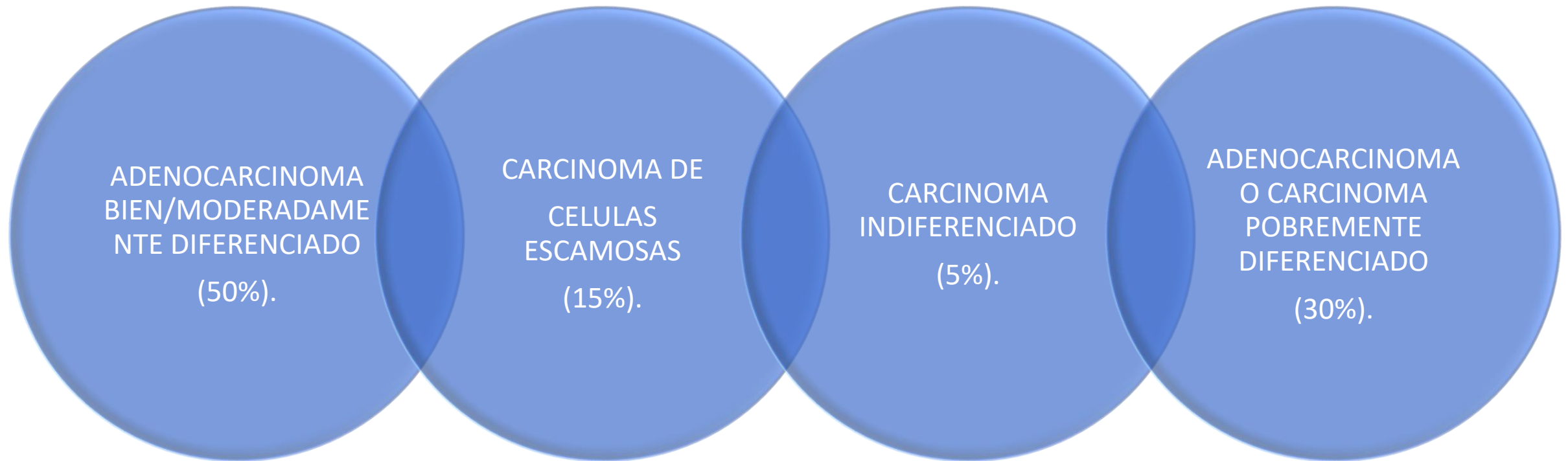
PERÍMETRO ABDOMINAL ELEVADO.

BAJO ESTATUS SOCIOECONÓMICO.

Schroten-Loef, C., Verhoeven, R. H. A., de Hingh, I. H. J. T., van de Wouw, A. J., van Laarhoven, H. W. M., & Lemmens, V. E. P. P. (2018). Unknown primary carcinoma in the Netherlands: decrease in incidence and survival times remain poor between 2000 and 2012. *European journal of cancer (Oxford, England : 1990)*, *101*, 77–86. <https://doi.org/10.1016/j.ejca.2018.06.032>.

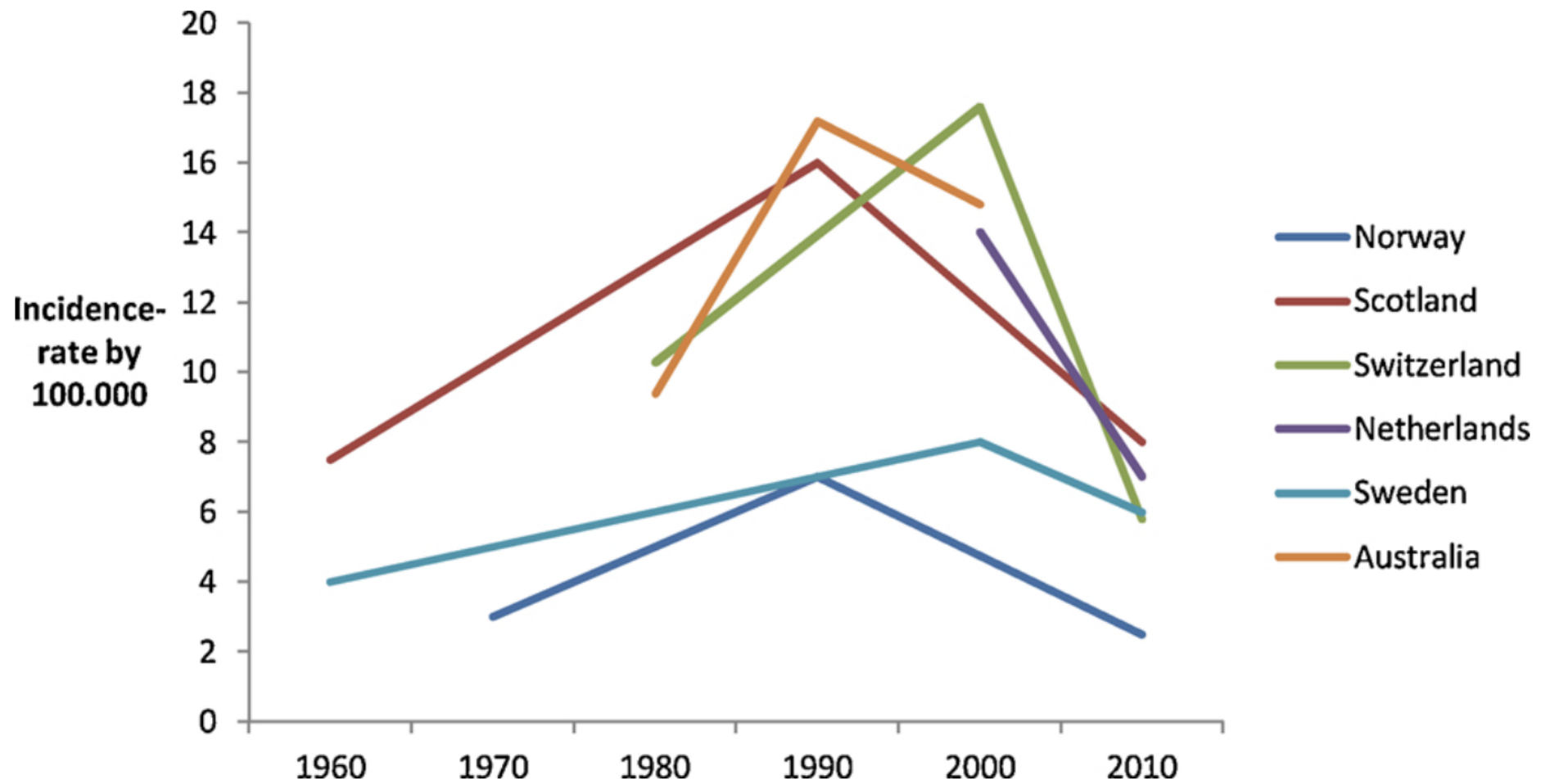
Kaaks, R., Sookthai, D., Hemminki, K., Krämer, A., Boeing, H., Wirfält, E., Weiderpass, E., Overvad, K., Tjønneland, A., Olsen, A., Peeters, P. H., Bueno-de-Mesquita, H. B., Panico, S., Pala, V., Vineis, P., Quirós, J. R., Ardanaz, E., Sánchez, M. J., Chirlaque, M. D., Larrañaga, N., ... Canzian, F. (2014). Risk factors for cancers of unknown primary site: Results from the prospective EPIC cohort. *International journal of cancer*, *135*(10), 2475–2481. <https://doi.org/10.1002/ijc.28874>.

DIAGNÓSTICO



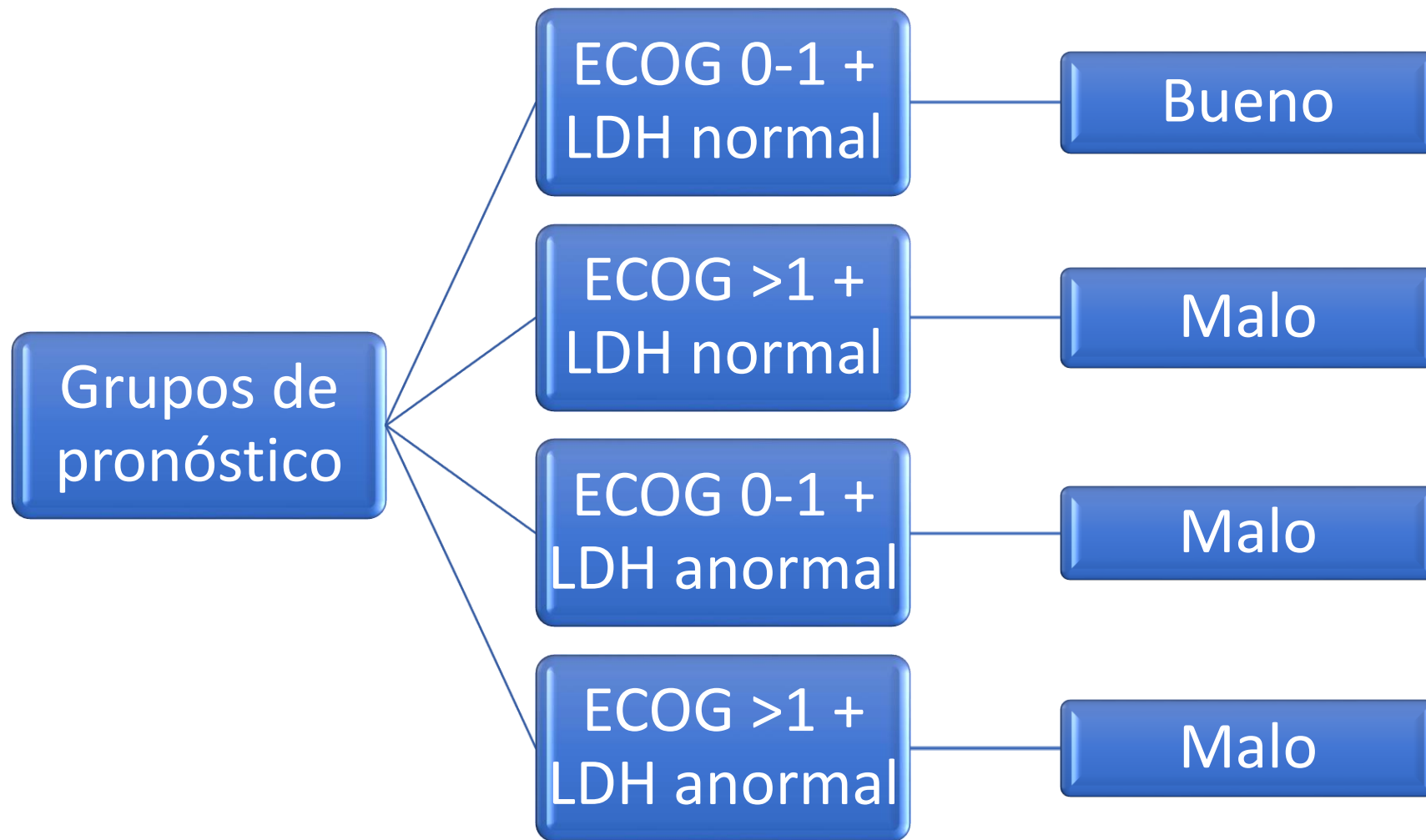
Assessment	Patient subset
Complete clinical history and physical examination, include head and neck and rectal examination CBC, LDH, and serum markers CT thorax, abdomen, and pelvis	All patients
Serum tumor markers	Midline presentation
AFP, BHCG	Men with adenocarcinoma and bone metastasis
PSA	Women with peritoneal adenocarcinoma
CA 125	All women
Mammography	Women with axillary adenocarcinoma
Breast MRI	Selected cases:
PET/CT	Cervical squamous cell carcinoma
	If radical treatment is possible
Endoscopy	Sign/symptom/IHC oriented
Octreoscan and chromogranin A	Neuroendocrine tumor CUP

CBC Complete blood count, *LDH* Lactate dehydrogenase, *CT* Computed tomography, *MRI* magnetic resonance imaging, *PSA* Prostate-specific antigen, *PET/CT* Positron-emission tomography, *IHC* Immunohistochemistry, *AFP* Serum α -fetoprotein, *BHCG* human chorionic gonadotropin, *CA 125* cancer antigen 125



Rassy, E., & Pavlidis, N. (2019). The currently declining incidence of cancer of unknown primary. *Cancer epidemiology*, 61, 139–141. <https://doi.org/10.1016/j.canep.2019.06.006>.

PRONÓSTICO



CONCLUSIONES



Es un diagnóstico
histológico.

De manejo
interdisciplinar.

Ganar tiempo.

Estudio sistemático y
organizado.