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Intestinal stromal tumor with large unique hepatic metastasis – diagnostic difficulties

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Abstract
The digestive tract mesenchimal neoplasms were viewed modified radically once it was discovered that gastrointestinal stromal tumors (GIST), the most frequent non-epithelial digestive tumors, constitute a distinctive group of tumors originating în the interstitial cells of Cajal, cells which normally express the CD117 antigen. The discovery of GIST's origin and understanding of the molecular mechanisms underlying the develoment of such tumors have led to important progress concerning their diagnosis and treatment. Thus, tumoral expression of c-KIT (CD117) is presently considered to be the most specific criterion for the diagnosis of GIST, and targeted molecular therapy using thyrosin-kinase inhibitors (imatinib) has encouraging results even în the case of locally advanced or metastatic tumors. This is the case of a 47 year old man who accused nonspecific abdominal symptomatology due to a large epigastric tumor which, postoperatively, proved to be the metastasis of a stromal enteral tumor.
Key words: GIST, jejunal tumor, liver metastasis, immuno-histochemistry, imatinib

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