**A Unique Case of Abdominal Pain**

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**Abstract**

Gallbladder cancer is a rare type of cancer with a long-term poor prognostic outcome. Gallbladder cancer reportedly makes up less than 1% of all cancers in the U.S. It is usually diagnosed in patients older than 60 years of age. Due to patients remaining asymptomatic in the early stage of disease, diagnosis is often delayed and disease stage at diagnosis is advanced. In early-stage disease, it may be associated with gallstones, but this is not often the case. Most patients present with symptoms such as upper abdominal pain, weight loss, nausea, vomiting, diarrhea, anorexia, or jaundice. Other symptoms may include fever, chills, cough, chest pain, shortness of breath, palpitations, dizziness, headache, fatigue, rash, or edema. The most common cause of death is related to hepatic failure due to metastatic disease or distant spread. Gallbladder cancer patients present with symptoms such as weight loss, fatigue, jaundice, and abdominal pain. The median survival for patients with gallbladder cancer is 6 months. Risk factors include a history of gallstone disease, H. pylori infection, smoking, obesity, and familial factors. Many patients are asymptomatic, but those that do experience symptoms have a poor prognosis due to advanced stages of disease at diagnosis.

**Case Presentation**

**Setting:** Outpatient Internal Medicine Office

**Patient Demographics:** 46-year-old Hispanic female

**Chief Complaint & History of Present Illness:**
- Central hypochondrial abdominal pain for the last 10 days, back pain, change in bowel habits, chest pain, constipation, diarrhea, dark stools, fever, heartburn, hematemesis, jaundice, melena, nausea, or vomiting.

**Past Medical History:**
- Cholelithiasis, gallbladder surgery

**Medications:**
- None

**Social History:**
- Never a cigarette smoker
- No alcohol abuse

**Family History:**
- Father: positive for any medical conditions
- Mother: the same as father

**Physical Examination:**
- Vital signs: temperature 98.6°F, heart rate 78 bpm, respiratory rate 16 bpm, blood pressure 122/84 mmHg, height 5’7”, weight 164 pounds
- HEENT:
  - Pupils are equal, round, and reactive to light
  - Conjunctivae normal
- Neck:
  - Normal range of motion
- Cardiovascular:
  - Heart sounds: normal
  - P脉: normal
- Lungs:
  - Bowel sounds are normal
- Dermatology:
  - Normal skin with no lesions
- Abdomen:
  - Soft, normoactive, non-tender
- Pelvis:
  - Rectal examination: normal
- Neurological:
  - Normal mental status
- Genital:
  - Normal

**Diagnosis:**
- Cholelithiasis
- Gallbladder cancer

**Differential Diagnoses**

- Congenital biliary cysts
- Eosinophilic esophagitis
- Gallbladder polyps
- Diabetic ketoacidosis
- Diabetic gastroparesis
- Porcelain gallbladder
- Porcelain stomach
- Peptic ulcer disease
- Hepatitis C
- Peritoneal mesothelioma
- Paraneoplastic syndrome
- Chronic pancreatitis
- Chronic liver disease
- Sclerosing cholangitis
- Gastroesophageal reflux disease
- Nontoxic goiter
-码头 and mesenteric ischemia
- Diabetic gastroparesis
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**Course of Care:**
- Day 1:
  - Labs ordered: CBC, CMP, Hg, UA, LIP (See results below)
  - EKG: normal, no Q wave, no ST depression, no ST elevation, no cardiac abnormality
  - Negative H. pylori antibodies
  - CT of abdomen and pelvis completed, no evidence of malignancy
  - Hospitalized
- Day 5:
  - Patient seen in internal medicine clinic to follow up 1-2 months later
  - Patient did not complete CT scan
  - No improvement with pain medication
- Day 10:
  - Patient seen in office for follow up
  - H. pylori antibodies positive
  - Started on omeprazole therapy
  - CT scan of abdomen and pelvis completed
  - CT showed no evidence of malignancy
  - Patient completed omeprazole therapy
  - CT scan of abdomen and pelvis completed
  - CT showed no evidence of malignancy
- Day 7:
  - Patient seen by general surgery
  - Patient underwent exploratory laparotomy
  - Patient underwent laparoscopic cholecystectomy
  - CEA and CA19-9 were within normal limits (See results below)
  - Patient was seen by medical oncology
  - Patient was started on adjuvant chemotherapy with capecitabine for 6 months.

**Case Conclusion:**
- The patient was diagnosed with gallbladder cancer, and the importance to remain diligent in our goal for early diagnosis and improved prognosis.

**References**

- [Advocate Medical Group, Chicago, Illinois.](https://www.advocatehealth.com)