

degrees. Post procedure, she recovered well. Her symptom was relieved. 1 year post procedure she remains asymptomatic, no evidence of stent migration with patent non dilated left renal vein.

CONCLUSION

EVS plus SMA angle monitoring is an attractive inexpensive new technique which can be used but needs further evaluation due to the potential subsequent risk involved.

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A RARE CASE OF METASTATIC DISEASE OF THE AORTA

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INTRODUCTION

Carcinoma of unknown primary (CUP) is defined as metastatic lesion without identifiable primary origin despite complete clinical history, physical examination; laboratory tests, imaging techniques and extensive histopathological specimen examination have been done.

CASE REPORT

We report a case of a 28 year old lady presented with worsening abdominal pain for 2 weeks duration. Examination was unremarkable. Computed tomography of the abdomen and pelvis showed aortic mass with paraaortic lymph node in which ultrasound guided biopsy confirmed to be metastatic adenocarcinoma. Position emission tomography (PET) scan and colonoscopy failed to find the primary tumour. Exploratory laparotomy, en bloc excision of the aortic tumour with

aortic reconstruction was done with Dacron graft. 28 cycles of radiotherapy was given to the abdomen. She developed graft infection thus the graft was removed and a bilateral axillofemoral bypass was done. Follow-up computed tomography of the abdomen revealed a new lesion at segment V of the liver. Chemotherapy was given. On follow-up, she developed new lesions at the left anterior abdominal wall, right thigh and worsening liver metastasis. She was sent for second line chemotherapy.

CONCLUSION

Metastatic adenocarcinoma in the aorta is rare and can be treated by en bloc resection and reconstruction.

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TUMOUR OF THE INFERIOR VENA CAVA: A CASE SERIES

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INTRODUCTION

Inferior Vena Cava (IVC) leiomyosarcoma is a very rare vascular tumour. It is a slow growing tumour, a fact that frequently delays the diagnosis and keeps the patient to be asymptomatic.

CASE REPORT

Case 1

50 year old gentleman was incidentally found to have a large mass in the abdomen via ultrasound while he was being investigated for anaemia. Computerised tomography (CT) scan revealed a retroperitoneal tumour which was arising from the inferior vena cava. The tumour was resected en bloc