Patient JS

- 20 yo male (PMH asthma, PSH appendectomy)
- CC: 4-5 months of left shoulder pain and weakness
- HPI:
  - 9/2017: Started power lifting
  - 10/2017: Developed left shoulder discomfort and achiness. No trauma. Given ibuprofen by PCP.
  - 1/2018: Follow-up PCP, developed weakness, difficulty sleeping.

- PE (2/2018):
  - Visible fullness of proximal left arm
  - Active ROM restricted to no more than 90 degrees of combined abduction
  - Distal neurovascular LE grossly intact
- Labs
  - Alk phos 1241
  - LDH 517
Shoulder XR
CT
CT
CT
CT
CT
Pathology

FINAL DIAGNOSIS

LEFT PROXIMAL HUMERUS, CORE BIOPSY:

- OSTEOSARCOMA (SEE NOTE)

NOTE: THE CORE SHOWS AN OSTEOBLASTIC OSTEOSARCOMA IN KEEPING WITH RADIOLOGICAL APPEARANCE
Metastatic Osteosarcoma

- 10-20% of patients have detectable pulmonary metastases at diagnosis
- 30-40% of patients with nonmetastatic osteosarcoma will develop pulmonary metastases later
- 10-50% long term survival with multimodality therapy

- Pulmonary-only metastases have a better chance of long term survival than bony metastases

- Pulmonary metastasectomy should be pursued
- Prognostic factors: tumor response to therapy (tumor necrosis), disease free interval, extent of metastases
References
