



## CLINICAL IMAGE IN GASTROENTEROLOGY

# The sign of Leser-Trélat associated with rectal carcinoma<sup>☆</sup>



## Signo de Leser-Trélat con carcinoma de recto

P. Martínez-Hernández Magro\*, J.J. Jaime Báez-García, J. Báez-Aviña

Departamento de Cirugía de Colon y Recto y Departamento de Dermatología, Hospital Guadalupano de Celaya, Celaya Guanajuato, Mexico

The sign of Leser-Trélat is characterized by the sudden manifestation and rapid growth in size and number of multiple seborrheic keratoses, related to an underlying neoplasia. A 57-year-old man, with a 4-month progression of changes in bowel habit, complained of thin stools and occasional rectal bleeding; one year earlier, an increasing number of skin lesions suddenly appeared on his back. Colonoscopy revealed a circumferential lesion 13 cm from the anal margin (Fig. 1) and the histopathologic study reported adenocarcinoma. Multiple dermal lesions appeared on the patient's back (Fig. 2); they were biopsied, and the reported result was seborrheic keratosis (Fig. 3).

The sign of Leser-Trélat is defined as the abrupt appearance and rapid increase in size or number of multiple seborrheic keratoses associated with a cancer. The sudden presentation of a large number of pigmented seborrheic keratoses should alert the clinician to rule out other entities and associations with neoplasia. Diagnosis of the skin lesions is confirmed through biopsy.



Figure 1 Colonoscopy showing a friable lesion with irregular edges, 13 cm from the anal margin, with a histopathologic diagnosis of adenocarcinoma.

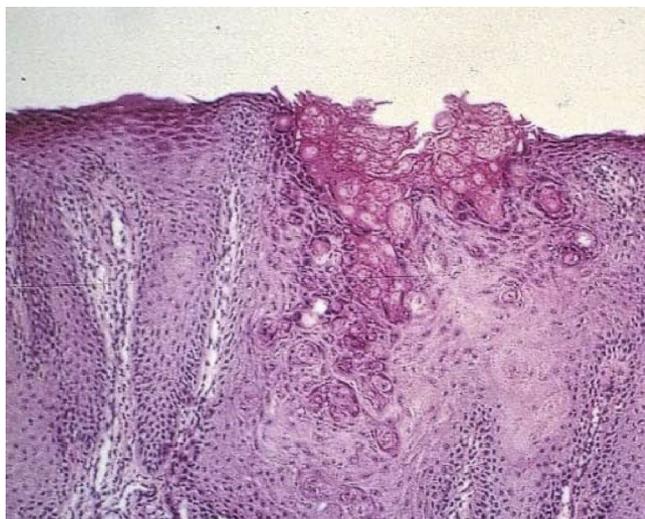


Figure 2 Dermal lesions on the back (seborrheic keratoses).

<sup>☆</sup> Please cite this article as: Martínez-Hernández Magro P, Jaime Báez-García JJ, Báez-Aviña J. Signo de Leser-Trélat con carcinoma de recto. Revista de Gastroenterología de México. 2014;79:294–295.

\* Corresponding author: Guadalupe 205-202, Col. Centro. CP 38000. Celaya Guanajuato. Mexico. Phone: +52 (461) 6162123.

E-mail address: paulinomhm@hotmail.com (P. Martínez-Hernández Magro).



**Figure 3** Biopsy of the lesions corroborating seborrheic keratosis.

### **Financial disclosure**

No financial support was received in relation to this article.

### **Conflict of interest**

The authors declare that there is no conflict of interest.