

Mentor Assessment 3

Name of Mentor: Dr. John Mansour

Profession: Surgical Oncologist

Location: U.T. Southwestern Medical Center- Pickens Biomedical Building

Date of Visit: February 1, 2017

Time: 12:00 - 1:00 p.m.

Assessment:

This week I drove down to U.T. Southwestern to attend the Gastrointestinal Disease Oriented Team (GIDOT) conference. This week was rare tumor day, so I was able to experience and learn about a lot of tumors that I was unfamiliar with. At the conference, the doctors covered around five cases, and each was incredibly interesting.

The first case they presented was the case of a woman with combined hepatocellular and cholangiocellular carcinoma (CHC) which was discovered as when her general surgeon performed a liver transplant recently. This type of cancer is extremely rare, and accounts for less than 1% of all primary hepatic tumors in the country. She had a T-2 tumor, which means that it was sized between 2 and 5 centimeters. This type of tumor is a single tumor composed of both hepatocellular carcinoma (HCC) and intrahepatic cholangiocellular carcinoma (ICC), which is cancer of the liver and cancer of the bile duct. The pathology lab determined that the tumor was majority hepatocellular carcinoma, which is more difficult to treat. Unfortunately, she would not have been viable for any type of hepatocellular carcinoma clinical trials due to her recent transplant. This also created a particular difficult in treating the patient due to the immunosuppressant drugs required postoperatively in regards to transplant patients to prevent rejection of the new organ. This case was not only incredibly interesting, but it holds weight for my future career. I am not sure yet what area of cancer I want to specify in, but no matter what I am going to be treating difficult or rare cases. It is important for me, as a student, to educate myself in as many forms of cancer I can, because the opportunity to learn first hand about malignancies that account for only 1% of all primary hepatic cancers is fairly rare. This opportunity definitely reiterated the need and desire to soak up as much information as I possibly can, as well as supplementing this hands on experience with research I am completing at home. When I got back to school from the GIDOT conference, I made sure to research this specific cancer to learn as much about it as I could.

One of the other cases that was presented at this conference was a woman who had a history of uterine cancer and was currently presenting with a stricture in her colon, as shown on

the CT scan. At this point, the doctors were determining whether this was a metastasis of the uterine cancer or if it was a totally separate colon cancer. They could not reach the tumor to perform the biopsy due to the intense stricture of the colon. The main purpose of presenting the case was to determine whether or not the tumor was inside of the colon or on the outside, as this would help to determine whether or not the tumor was a uterine metastasis or a new, primary colon cancer. This is impactful on my future career because of the group dynamic of oncology. I really enjoy this aspect of cancer treatment, and I believe that it makes cancer treatment more effective and dynamic. I also think, in cases such as this one, it can help to determine both the course of treatment, as well as the diagnosis.