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Opportunistic Infection seen in the course of the Esophagus Cancer Treatment

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Abstract:Esophagus Cancer is thought to be the sixth leading cancer and fifth leading cause of death worldwide, with a high incidence.It occurs more frequently in men over50 years old.However overall curability rate is less than %10; systemic disease is found in over 50% of the cases at presentation, which leads to incurability. Thus the palliative and symptomatic treatment modalities are more important in esophagial cancers. Opportunistic infections concomitant to cancers are the problems which effect the life quality; negatively. An opportunistic infection- thezona zoster case, which is generated during the esophagus cancer treatment is presented in this case report. **Keywords:**Pain, cancer, palliative care, zona zoster

INTRODUCTION

Esophagus Cancer covers the 5-7% of digestion system cancers which is seen 4.5 cases/100 000/year with considerable geographical differences [1]. It occurs more frequently in men over50 years old. The age adjusted mortality is nearly 20000 deaths in men and 7000 deaths in women per year in USA. Esophagus Cancer is thought to be the sixth leading cancer and fifth leading cause of death worldwide, with a high incidence especially in Southern African countries and in Eastern Asia[2]. Diet, alcohol, tobacco, nitrosamine, asbestos, genetic factors, achalasia, radiotheraphy story, chronicoesophagitis and plummervinson syndrome are some of the etilogical factors [1-3]. However overall curability rate is less than %10; systemic disease is found in over 50% of the cases at presentation, which leads to incurability [2,4]. Thus the palliative and symptomatic treatment modalities are more important in eosophagial cancers.

Opportunistic infections seen by the course of cancers are the problems which decrease health quality in these patients. ZonaZoster, is a kind of opportunistic infection seen in the immune compramised patients. Zona is the Herpes Zoster infection that occurs more often in breast and torso area as one-sided and leads to churching pain throughout the neuronic traces [5,6]. Herpes zoster can occur at anyage but most commonly effects the elderly population.In this paper, the importance of the subject is emphasized by presenting the zona zoster case, which is generated during the esophagus cancer treatment.

CASE REPORT

A 51-yearold woman patient, who was tracked and investigated, is checked in to Family Practice Palliative Care bed service by the radiation oncology on July 2013 with esophagus cancer diagnosis. There exists the squamous-cell esophagus cancer diagnosis of patient, which was diagnosed by the medical oncology $(T_3N_0M_0)$. At the time of the diagnosis, left pulmonaryveinand left atrium metastasis are determined by thoracal computerized tomography, and is evaluated as inoperable and the radiotherapy treatment is approved. Twenty-five cure radiotherapy treatments are applied. At the end of the twenty-five cures, a burning and intense pain is begun at the back side, which matches with the right breast and dermatome. Right after, water-filled vesicles emerged at the same area. Zona zoster is diagnosed clinically on the basis of the characteristic appearance of the rash (figure 1).



Fig. 1: Characteristic appearance of the rash for zona zoster

Radiotherapy is paused, antiviral treatment is given. The patient that her pain doesn't get better with the basic analgesic is interned to Izmir Tepecik Education Research Hospital Family Practice Palliative Care Bed Service for advanced analgesic treatment. On initial examination, she had a bad status with severe pain temperature of 37,2°C, heart rate 85 beats/min, arterial pressure 110/80 mmHg, the ventilatory frequency 22 bpm. Any important physical finding is found except the Zona vesicles lying at the right breast dermatome. No significant laboratory findings discovered except anemia with aHb level of 11.9. Valasiklovir 100mg 3x1 for 7 days orally, acyclovir epidermally used, and pregabaline 300mg/24 h orally; fentanyl 75mg transdermal form for the pain is applied. For the beyond treatment of the patient, whose pain is stopped and skin spoils got better, recovery of the general condition is waited.

DISCUSSION

Esophagus cancer is a common form of cancers with a limited survey which is more often seen in men over 50 years old [1, 2]. The case is nearly 50 years and woman. Surgery is the curative treatment of the esophagus cancer. The curability rates are so poor that they are usually uncurable at presentation [4]. Our case was at the stage of T3N0M0 at presentation and so it was told to be uncurable as seen in literature. She was considered as inoperable and is taken to radiotherapy treatment. Radiotherapy was cut down with the appearance of Zona vesicles. Several studies have demonstrated that people with suppressed cellmediated immunity from immunosuppressive diseases are at higher risk of zoster. Radiotherapy and chemotherapy given for the treatment of malignities increases the risk of opportunistic infections [8]. Some cases when the body strength is shrinked such as stress, sadness, insomnia and tiredness may be trigger the zona disease [9]. Malignities are the dramatical forms of immune deficiency and the diagnosis of cancer at presentation chemotherapy and radiotherapy arethe other stress factors leading to opportunistic infections as well, in this case. The case had zona infection not much long after the diagnosis of cancer. Radiotherapy that is given for esophagus cancer may also thought to increase the zona frequency. For this reason, a break was given to radiotherapy and the zona treatment was begun for the patient. Zona is a painful disease, which affects the quality of life negatively. Therefore the

patient needed hospitalization for analgesia as a palliative treatment.

CONCLUSION

Patients with several malignities have predisposition to opportunistic infections. Zona zoster is a kind of opportunistic infection leading to severe pain and decreasing the life quality by the malignity patients. Patients feel well if appropriate analgesie is performed. This phenomenon is important because it is an example of the zona zoster in, which is one of the opportunist infections, demonstrating that it can deal with the reasons such as lack of immune, cancer and stress.

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