

Case Presentation: Esophageal GIST

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Questions

Question 1

Which of the following is the most common immunohistochemical marker expressed in esophageal GISTs?

- A. Cytokeratin
- B. CD117 (c-KIT)
- C. Desmin
- D. S-100

Question 2

What is the most common clinical presentation of esophageal GISTs?

- A. Dysphagia
- B. Hematemesis
- C. Chronic cough
- D. Weight gain

Introduction

- **Esophageal GIST** is rare (accounts for <1% of all GISTs).
- Originates from **interstitial cells of Cajal**.
- Typically presents in middle-aged to older adults.
- Common sites: Stomach (60–70%), small intestine (20–30%), esophagus is rare.

History

Case presentation

- 65 years old female patient presented with progressive dysphagia since November 2025
- she experienced dysphagia to solid food for which she has to take extra water for swallowing
- Associated with this she has also regurgitation of undigested food which worsen following feeding and sleeping

cont....

- She had symptoms of epigastric burning pain for which she had been taking medications
- She denied history of weight loss or abdominal distension
- She has no cough, dyspnea or change in voice

cont...

- No family history of the same illness
- She was newly diagnosed hypertension, and on treatment with optimal Pressure control
- She has no history of diabetes, cardiac illness or neurologic disorder
- She had history of total abdominal hysterectomy in 2022 for endometrial cancer

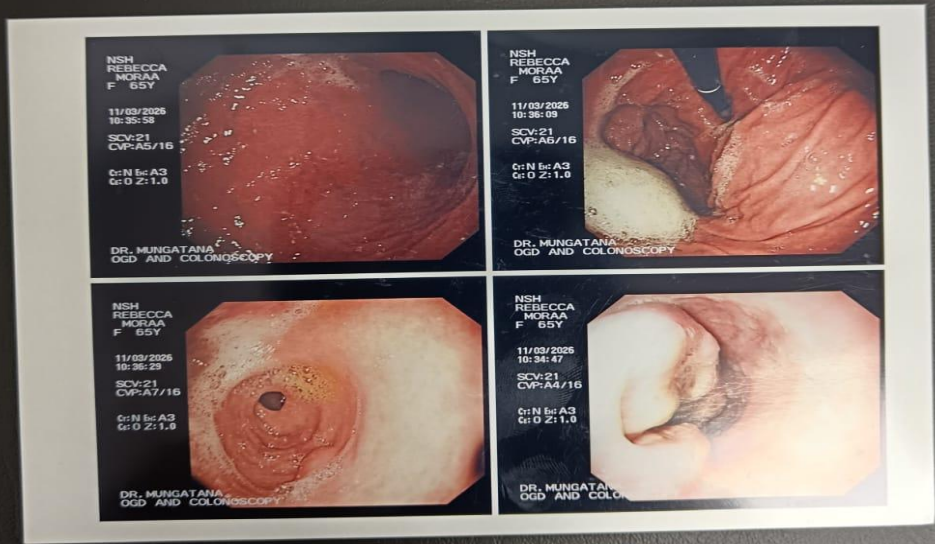
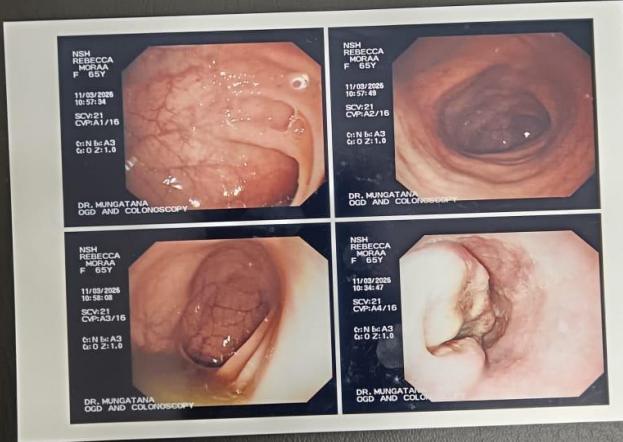
Physical exam.

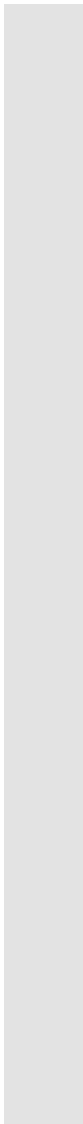
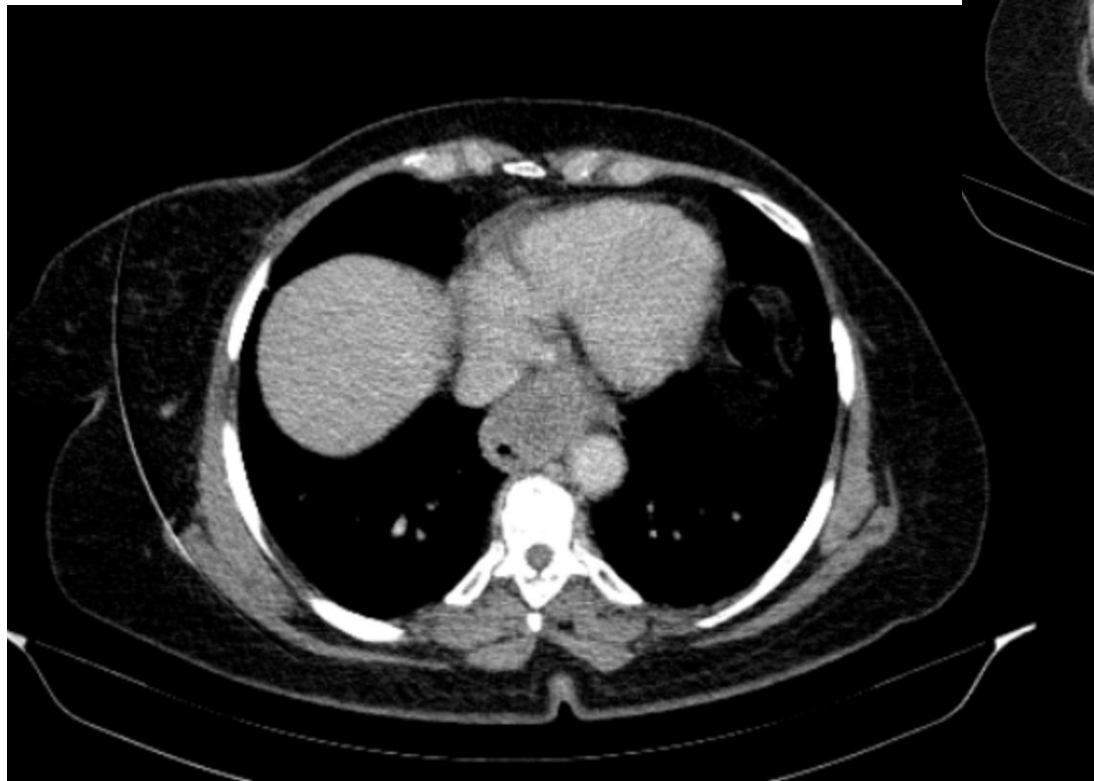
Not hypertensive, BMI 31.06kg/m²

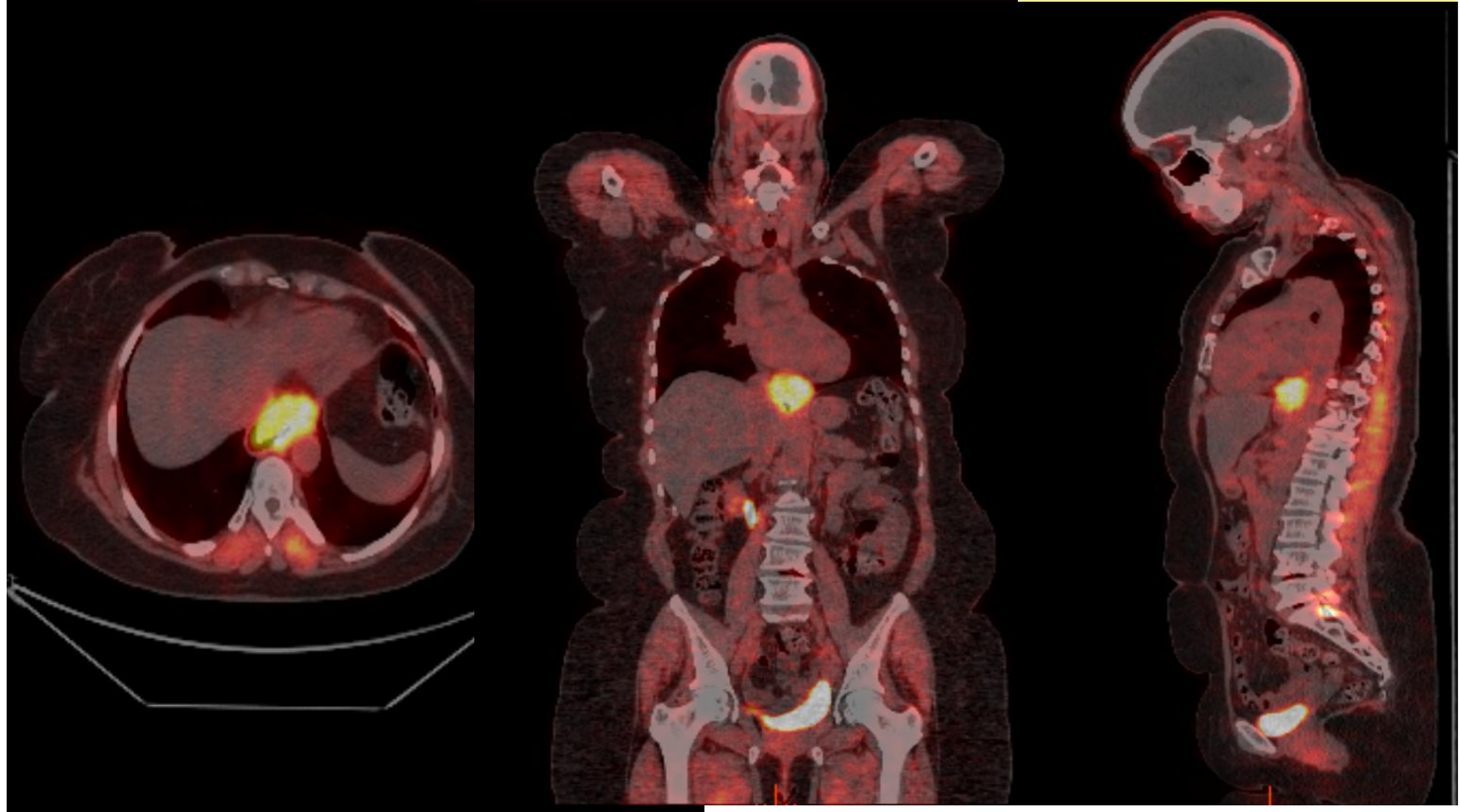
S/E

- No LAP in all accessible areas
- Bilateral clear lung
- Obese abdomen, no mass, organomegaly or evidence of ascites
- ROS- unremarkable

Labs normal values







- Histopathology: Consistent with GIST
- Immunohistochemistry: CD117 (c-KIT), DOG1 positive

- Confirmed **Esophageal GIST**

Differential diagnoses:

- leiomyoma
- leiomyosarcoma
- schwannoma

Management

- **Surgical resection:** Ivor Lewis esophagectomy
- **Targeted therapy:** Histologic grade and mitotic rate
- Post-op care and follow-up

Discussion

- Rarity of esophageal GIST
- Importance of immunohistochemistry
- Prognosis depends on size, mitotic index, and resection margins
- Role of targeted therapy in advanced cases

Conclusion

- Esophageal GIST is rare but important to recognize.
- Early diagnosis and complete surgical excision are key.
- Targeted therapy improves survival in advanced cases.



Thank you!