treatment. For patients with advanced stage, the identification of the tumor site is important to guide the resection and to limit the extent of radiotherapy. This improves the locoregional control and overall survival [22,23]. In our patients with incidentally detected HNSCC, the follow-up demonstrated good results from the management of the synchronous tumor. For the ovarian cancer detected incidentally, the follow-up of nine months demonstrated also neither relapse, nor dissemination of the disease.

Conclusion

Knowing the pattern of dissemination of tumors, some of the detected lesions and pathological findings can be addressed to other primary tumor, what can significantly influence management of the patient. The rate of the detected synchronous malignancies is not high, but the careful interpretation, observation and histological confirmation can influence the patients' management and prognosis.

References