

Gallbladder Rupture as Presentation of Urothelial Carcinoma

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Spontaneous gallbladder rupture is an unusual clinical entity most frequently described after traumatic injury and rarely in relation to malignancy. We present a case of gallbladder rupture with intrahepatic abscess as the initial presentation for urothelial carcinoma. A 57 year-old female with a past medical history most notable for spina bifida with chronic suprapubic catheter and invasive ductal carcinoma with partial mastectomy and radiation therapy seven years prior, presented to the emergency department for seven days of flank pain and fever. Evaluation revealed ruptured gallbladder with intrahepatic abscess, elevated carcinoembryonic antigen (CEA) and Carbohydrate Antigen 19-9 (Ca 19-9). She underwent percutaneous liver biopsy with drain placement; pathology was most consistent with urothelial carcinoma, though no primary malignancy was identified on subsequent cystoscopy. She was initiated on carboplatin and gemcitabine regimen for metastatic carcinoma with presumed urothelial primary. Her intrahepatic abscess was treated with prolonged course of IV vancomycin. Unfortunately, she continued to have progression of disease despite therapy and was transitioned to Pembrolizumab immunotherapy with palliative intent, though ultimately succumbed to her disease seven months after initial presentation.

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