**CASE REPORT: FROM CRITICAL CARE, TO SPECIALIST
PALLIATIVE CARE UNIT, TO HOME. INITIAL
PRESENTATION OF HIGH-GRADE SEROUS CARCINOMA
OF FALLOPIAN TUBE ORIGIN AS DERMATOMYOSITIS
WITH RAPID ONSET AND PROGRESSION: AN EXAMPLE
OF MULTIDISCIPLINARY TEAM WORKING DU**

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This case report describes a patient with dermatomyositis secondary to high grade serous carcinoma of fallopian tube origin. A previously fit and well former PE teacher presented to the acute medical unit with progressive muscle weakness, resulting in rapid debility over weeks. She had a significant bulbar muscle involvement and subsequent impairment of swallow, necessitating NG feeding and even suctioning of saliva. She was admitted to critical care following aspiration of nasogastric feed. She was intubated and ventilated, and a decision was made to proceed with a total laparoscopic hysterectomy and bilateral salpingo-oophorectomy for definitive management of her dermatomyositis. She was able to be

weaned and extubated the day after surgery. She received high dose immunoglobulins and steroids for the treatment of her dermatomyositis with limited immediate recovery of mobility, speech or swallow. A multi-disciplinary virtual meeting was attended by clinicians across five sites representing five specialities alongside family members on two continents and with the patient herself joining from her ITU bed. The decision was made to transfer the patient directly from ITU to a palliative care unit for continued supportive management of her dermatomyositis, therapy and discharge planning. She was unable to recover sufficiently to enable systemic cytotoxic treatment of her cancer, and remained on high dose steroids to support symptom management of the paraneoplastic condition. Discharge to a rural community was enabled through impeccable planning and support from community services and specialist inpatient multi-disciplinary working. This is the first case report of high-grade serous carcinoma of fallopian tube origin presenting as dermatomyositis and we describe learning points from multidisciplinary team working in the context of a highly complex condition with significant diagnostic uncertainty and with the additional challenge of restrictions arising during the height of a pandemic.