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Eosophageal, Gastric and Duodenal Disorders
P-196
A case of ampullary regenerative tissue mimicking adenoma after ampullectomy
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Objective: Ampullary adenoma is glandular dysplastic lesions that arise in and around the duodenal ampulla. Endoscopic ampullectomy is the treatment of choice for an ampullary adenoma. However, regenerative tissue developed at the post-ampullectomy site can mimic the ampullary adenoma.

Methods: We retrospectively reviewed the medical records of a patient treated for the ampullary adenoma. Results: A 67-year-old woman underwent screening esophagogastroduodenoscopy. A protruding mass-like lesion was found at the ampulla of Vater (Figure A). Histological examination of the lesion revealed tubular adenoma with low grade atypism (Figure B). An endoscopic snare ampullectomy was performed. The microscopic ampullectomy specimen showed an adenoma, and the margin of specimen was free of the adenoma. Forty days after the ampullectomy, the patient visited the emergency department due to fever and abdominal pain. Acute cholangitis was suspected from the clinical findings. Endoscopic retrograde cholangiopancreatography was performed, and a recurrent protruding mass was found at the ampullectomy site (Figure C). We performed an ampullectomy again suspecting that this lesion was recurrent or remnant adenoma. However, the ampullectomy specimen revealed the regenerative epithelium, not true adenoma (Figure D). Conclusion: Regenerative epithelial tissue can mimic recurrent or remnant adenoma after an ampullectomy.

Keywords: 1. Ampullary adenoma; 2. endoscopic ampullectomy

Esophageal, Gastric and Duodenal Disorders
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Upper gastrointestinal malignancy in patients undergoing esophagogastroduodenoscopy in sanglah general hospital denpasar
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Objective: Upper gastrointestinal (UGI) malignancy is one of major causes of cancer related death. However, data of UGI malignancy in Indonesian health care center were limited. This study was aimed to determine the prevalence of UGI malignancy in patients undergoing esophagogastroduodenoscopy in Sanglah General Hospital Denpasar.

Methods: A retrospective study was conducted on 780 patients who had esophagogastroduodenoscopy in Endoscopy Unit of Sanglah General Hospital Denpasar between June 2012 and May 2014. Demographic, endoscopic and histopathological findings were documented. Results: Of 780 patients undergoing esophagogastroduodenoscopy, 46 (5.9%) were confirmed with UGI malignancy. Thirty one (6.7%) patients were male. The mean age was 55.91 ± 10.995 years. Of 46 UGI malignancy patients, 25 (54.3%) had gastric cancer, 14 (30.4%) with esophageal cancer, and 7 (15.2%) had duodenal cancer. From histopathological findings, 19 patients (41.3%) had adenocarcinoma of gastere, 5 (10.9%) with signet ring carcinoma of gastere, 5 (6.5%) with specimen of esophage, 5 (10.9%) with squamous cell carcinoma of esophage, and 7 (15.2%) with adenocarcinoma of duodenum. Thirteen (52.4%) cases of gastric cancer were localized in antrum and 9 (36%) were localized in corpus.

Conclusion: UGI malignancy was found in 5.9% undergoing esophagogastroduodenoscopy in Sanglah General Hospital Denpasar. The most frequent UGI malignancy was gastric cancer, while adenocarcinoma was the most frequent type of gastric cancer.

Keywords: 1. Esophagogastroduodenoscopy; 2. upper gastrointestinal malignancy

Esophageal, Gastric and Duodenal Disorders
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Erosive reflux esophagitis in naive vietnamese patients with upper gastrointestinal symptoms and its association with h. pylori infection
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Objective: (1) To evaluate the prevalence and severity of erosive reflux esophagitis (ERD), and (2) to assess the association between ERD and H. pylori infection.

Figure 1
UPPER GASTROINTESTINAL MALIGNANCY IN PATIENTS UNDERGOING ESOPHAGOGASTRODUODENOSCOPY IN SANGLAH GENERAL HOSPITAL DENPASAR


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ABSTRACT

Background: Upper gastrointestinal (UGI) malignancy is one of major causes of cancer related death. However, data of UGI malignancy in Indonesian health care center were limited. This study was aimed to determine the prevalence of UGI malignancy in patients undergoing esophagogastroduodenoscopy in Sanglah General Hospital Denpasar. Methods: A retrospective study was conducted on 780 patients who had esophagogastroduodenoscopy in Endoscopy Unit of Sanglah General Hospital Denpasar between June 2012 and May 2014. Demographic, endoscopic and histopathological findings were documented. Results: Of 780 patients undergoing esophagogastroduodenoscopy, 46 (5.9%) were confirmed with UGI malignancy. Thirty one (67.4%) patients were male. The mean age was 55.91 ± 10.995 years. Of 46 UGI malignancy patients, 25 (54.3%) had gastric cancer, 14 (30.4%) with esophageal cancer, and 7 (15.2%) had duodenal cancer. From histopathological findings, 19 patients (41.3%) had adenocarcinoma gaster, 5 (10.9%) with signet ring carcinoma of gaster, 3 (6.5%) with GIST, 7 (15.2%) with adenocarcinoma of esophagus, 5 (10.9%) with squamous cell carcinoma of esophagus, and 7 (15.2%) with adenocarcinoma of duodenum. Thirteen (52%) cases of gastric cancer were located in antrum and 9 (36%) were located in corpus. Conclusions: UGI malignancy was found in 5.9% undergoing esophagogastroduodenoscopy in Sanglah General Hospital Denpasar. The most frequent UGI malignancy was gastric cancer; while adenocarcinoma was the most frequent type of gastric cancer. Keywords: esophagogastroduodenoscopy; upper gastrointestinal malignancy