To the Editor:

Almost all early duodenal carcinomas are of the elevated type; the depressed type is rare.1–5 We report here a case of depressed-type, early duodenal carcinoma treated successfully by endoscopic mucosal resection (EMR). A depressed-type tumor, approximately 4mm in diameter, was detected endoscopically in the descending duodenum of a 53-year-old man during routine physical examination. Hypotonic duodenography (Fig. 1) showed a radiolucent shadow in the descending duodenum near the superior duodenal angle. The endoscopic picture revealed a small depressed-type tumor in the descending duodenum (Fig. 2). Ultrasonographic endoscopy showed that the tumor was limited to the mucosal layer. After obtaining informed consent from the patient, we performed EMR with saline solution injection under the lesion. The tumor was completely resected en bloc (Fig. 3). No bleeding or other complications were observed. When a cross-section of the tumor specimen was viewed macroscopically, the histological examination showed a markedly thickened collagen plate (Fig. 4).

References


Received: May 30, 2002 / Accepted: February 21, 2003
Reprint requests to: S. Sato
DOI:10.1007/S00535-003-1151-6

Depressed-type, early duodenal carcinoma (carcinoma in situ) treated by endoscopic mucosal resection

To the Editor: Almost all early duodenal carcinomas are of the elevated type; the depressed type is rare.1–5 We report here a case of depressed-type, early duodenal carcinoma treated successfully by endoscopic mucosal resection (EMR). A depressed-type tumor, approximately 4mm in diameter, was detected endoscopically in the descending duodenum of a 53-year-old man during routine physical examination. Hypotonic duodenography (Fig. 1) showed a radiolucent shadow in the descending duodenum near the superior duodenal angle. The endoscopic picture revealed a small depressed-type tumor in the descending duodenum (Fig. 2). Ultrasonographic endoscopy showed that the tumor was limited to the mucosal layer. After obtaining informed consent from the patient, we performed EMR with saline solution injection under the lesion. The lesion was completely resected en bloc (Fig. 3). No bleeding or other complications were observed. When a cross-section of the tumor specimen was viewed macroscopically, the histological examination showed a markedly thickened collagen plate (Fig. 4).
Fig. 1. Hypotonic duodenography shows a radiolucent image with irregular patches on the posterior wall in the descending duodenum.

Fig. 2. Endoscopic picture shows a depressed-type tumor in the descending duodenum.

Fig. 3. Macroscopic view of the resected specimen shows a depressed-type tumor, 4 mm in diameter.

Fig. 4. Photomicrograph of cross-section of specimen resected by endoscopic mucosal resection (EMR). H&E, × 5.

Fig. 5a,b. High magnification shows well-differentiated adenocarcinoma limited to the mucosal layer. a H&E, × 100; b H&E, × 400.