



Image of the Month

Adenomyomatosis hyperplasia arising in the bile duct

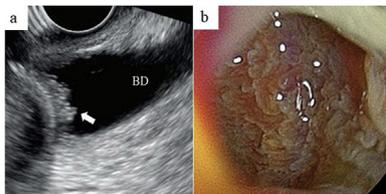
Kazuyuki Matsumoto^{a,*}, Hironari Kato^a, Kenji Nishida^b, Hiroyuki Okada^a^a Department of Gastroenterology and Hepatology, Okayama University Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama, Japan^b Department of Pathology, Okayama University Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama, Japan

Fig. 1. (a) EUS shows a hypoechoic papillary lesion (arrow) in the distal bile duct. BD: bile duct. (b) POCS shows flat, elevated lesions with a slightly reddish color at the end of the bile duct.

A 46-year-old man was referred to our hospital for a detailed examination of the bile duct. Contrast-enhanced computed tomography showed enhanced wall thickness of the lower bile duct. Endoscopic ultrasonography (EUS) revealed a hypoechoic papillary lesion in the distal bile duct (Fig. 1a), and endoscopic retrograde cholangiography showed a filling defect. Per-oral direct cholangioscopy (POCS) using an ultrathin endoscope (EG-L580NW; Fujifilm, Tokyo, Japan) revealed flat, elevated lesions with a slightly reddish color (Fig. 1b). Papillary adenocarcinoma of the bile duct was suspected, and we performed a bile juice cytology and a direct biopsy using biopsy forceps. The pathological results showed no signs of malignancy, however he ultimately decided to undergo pancreaticoduodenectomy, as a definitive diagnosis of the bile lesion could not be obtained. The pathological findings revealed papillary hyperplastic lesions at the distal end of the bile duct, and bundles of smooth muscle cells were observed between the hyperplastic mucosa (Fig. 2). The papillary lesion shows a biliary

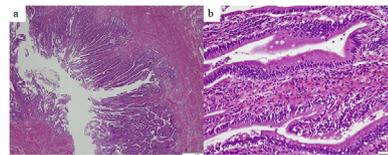


Fig. 2. (a) Histological findings show hyperplastic papillary lesions at the distal end of the bile duct (H.E. staining) (b) Hyperplastic papillary lesions and smooth muscle cells can be seen between the hyperplastic mucosa (H.E. staining).

phenotype on CK19 staining (Figure S-1) and bundles of smooth muscle fibers were confirmed on Desmin staining (Figure S-2). Based on these findings, a final diagnosis of adenomyomatous hyperplasia was made.

Adenomyomatosis arising in the periampullary area is extremely rare and frequently mimics neoplasm of the bile duct. Detailed investigation through accumulation of cases is necessary in the future.

Conflict of interest

None declared.

Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi:<https://doi.org/10.1016/j.dld.2019.03.006>.

* Corresponding author at: Department of Gastroenterology and Hepatology, Okayama University Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, 2-5-1 Shikata-cho, Okayama 700-8558, Japan.

E-mail address: matsumotokazuyuki0227@yahoo.co.jp (K. Matsumoto).