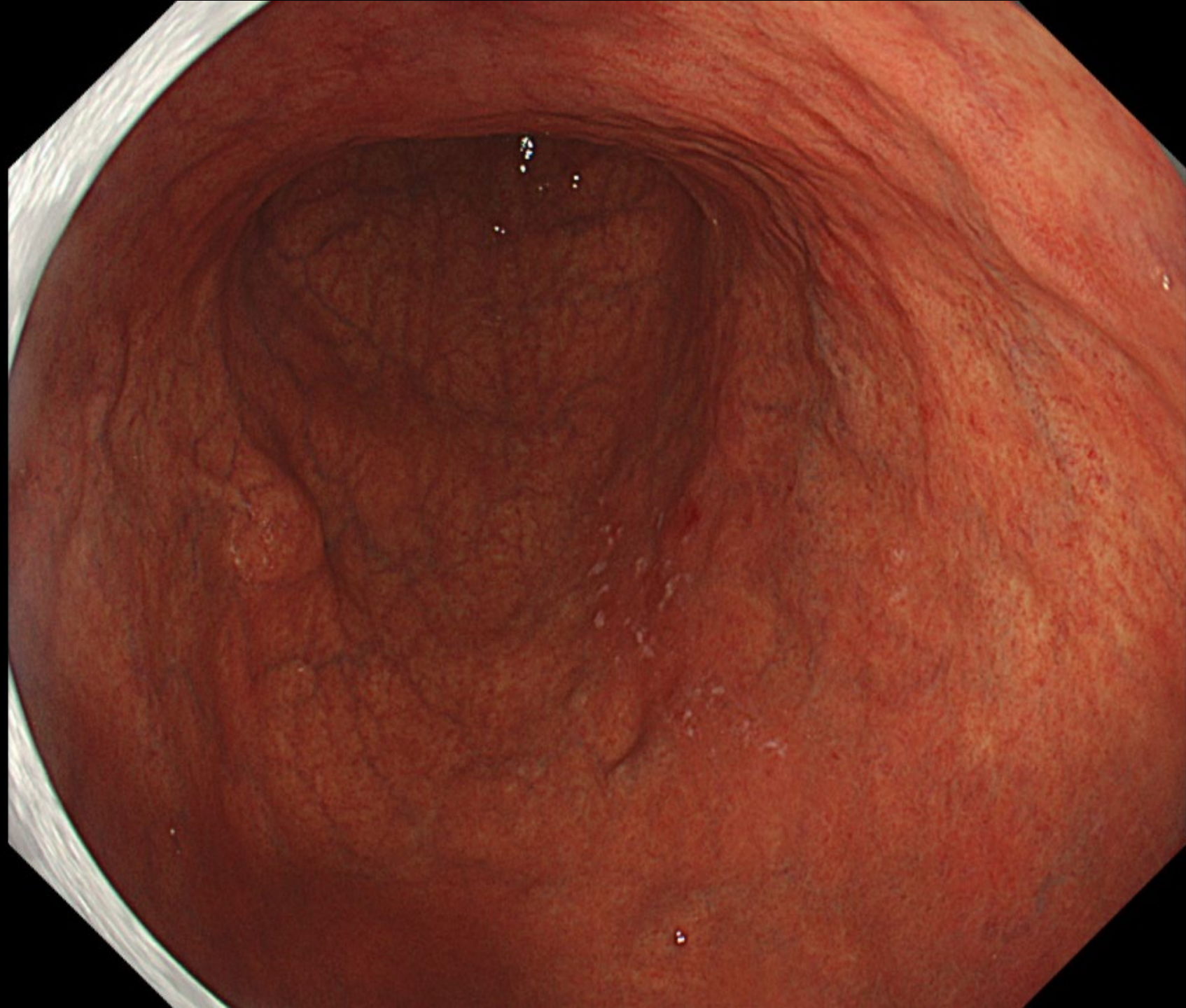


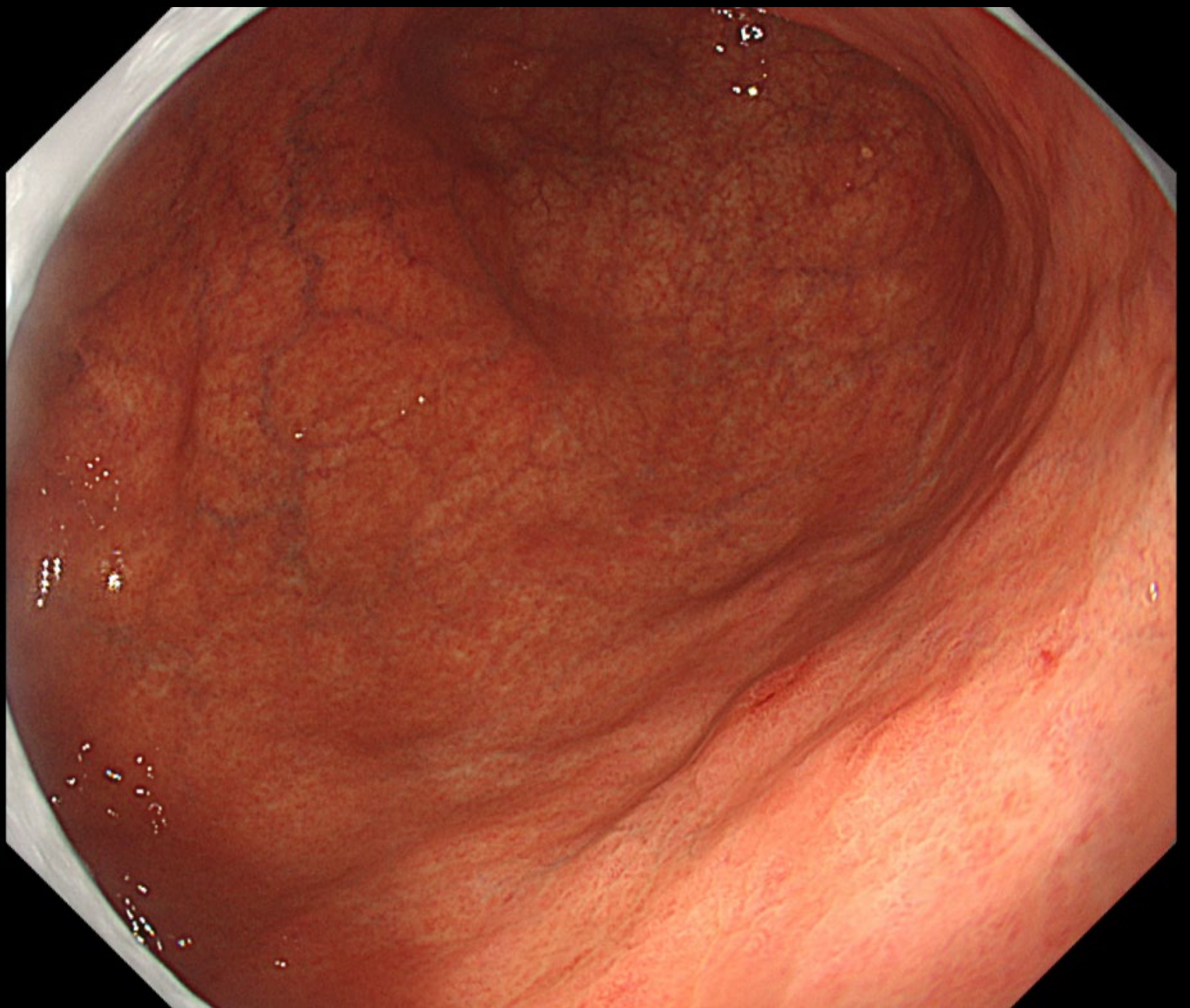
Mapping

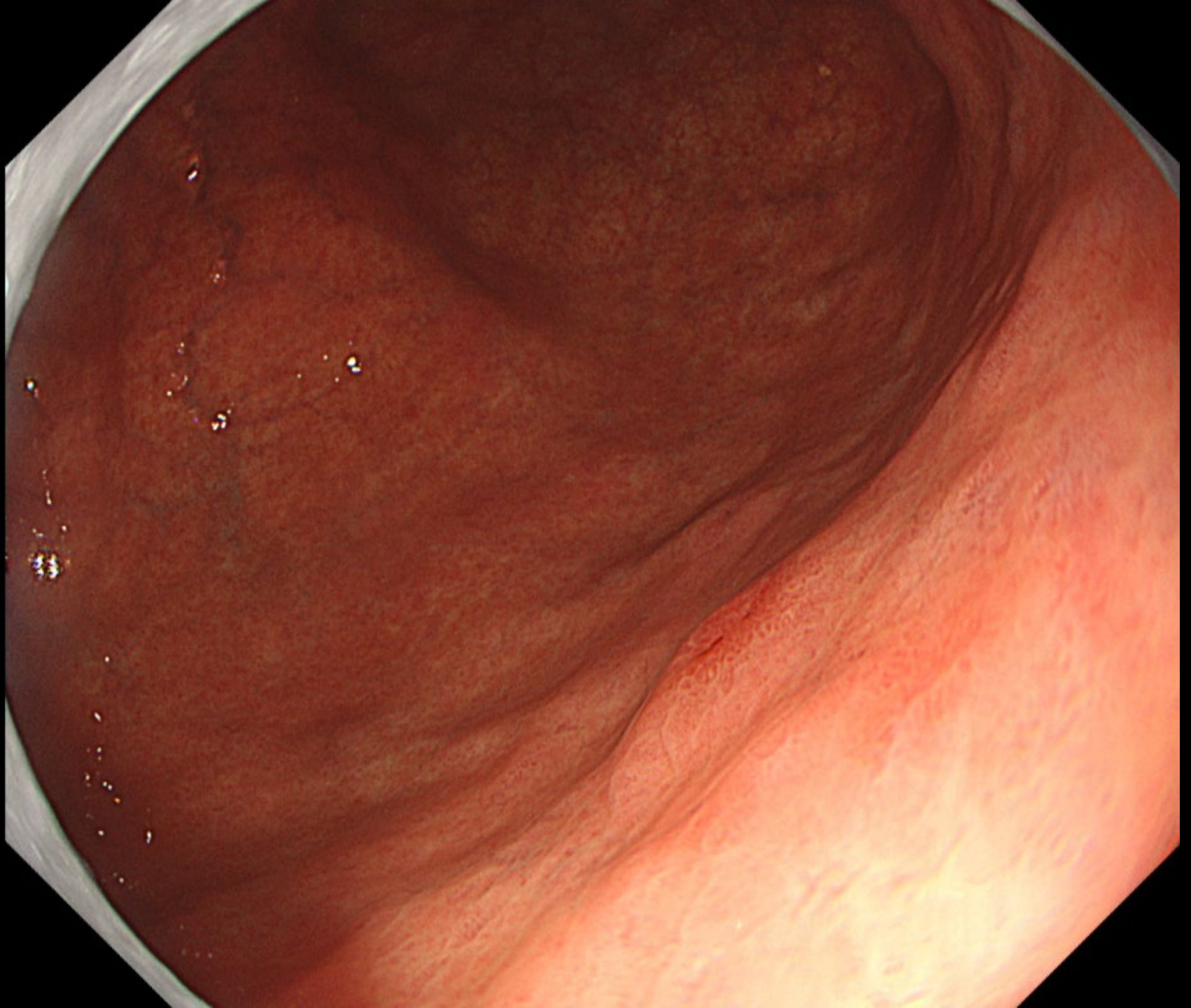
胃

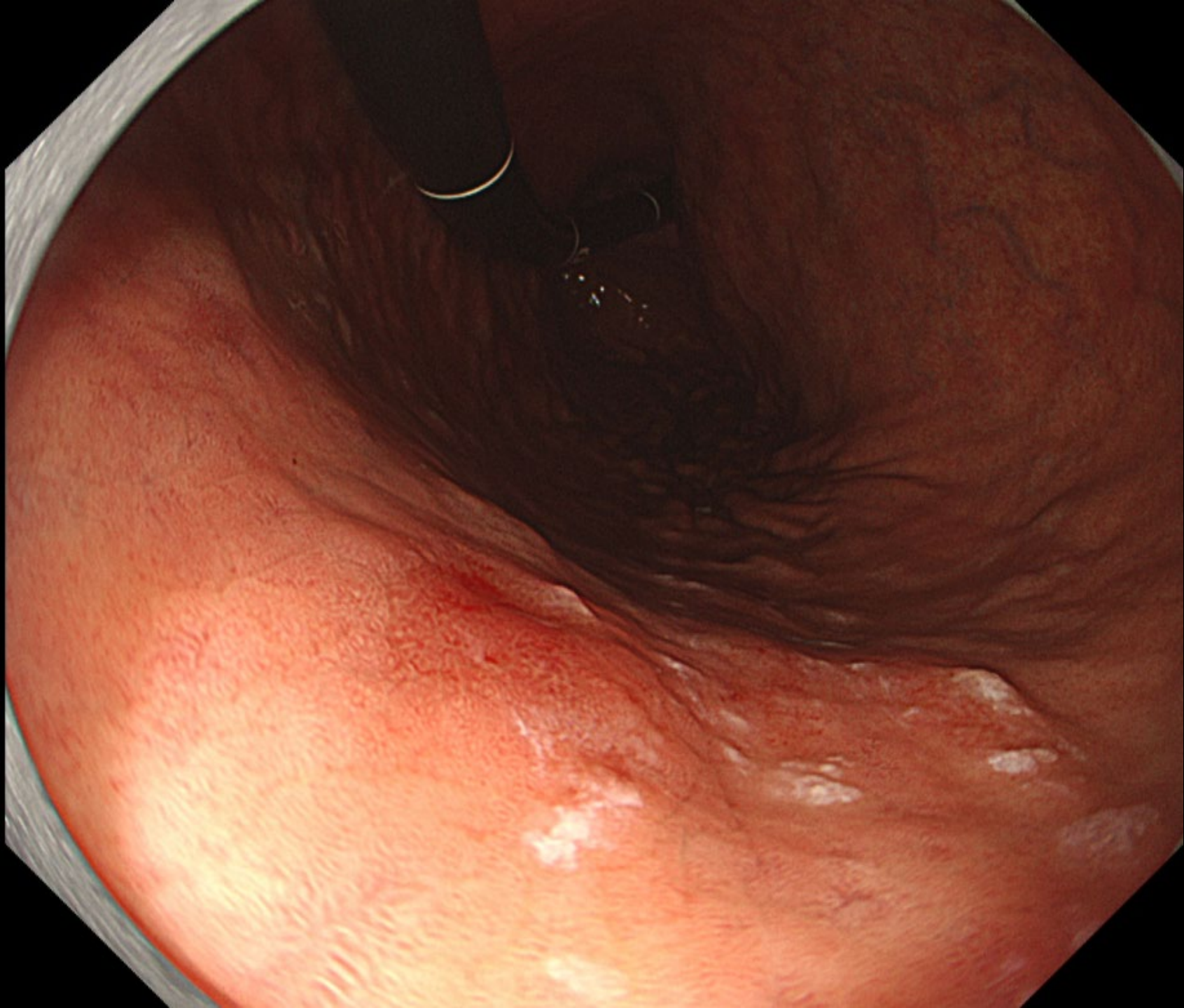
担当 伊丹 久実

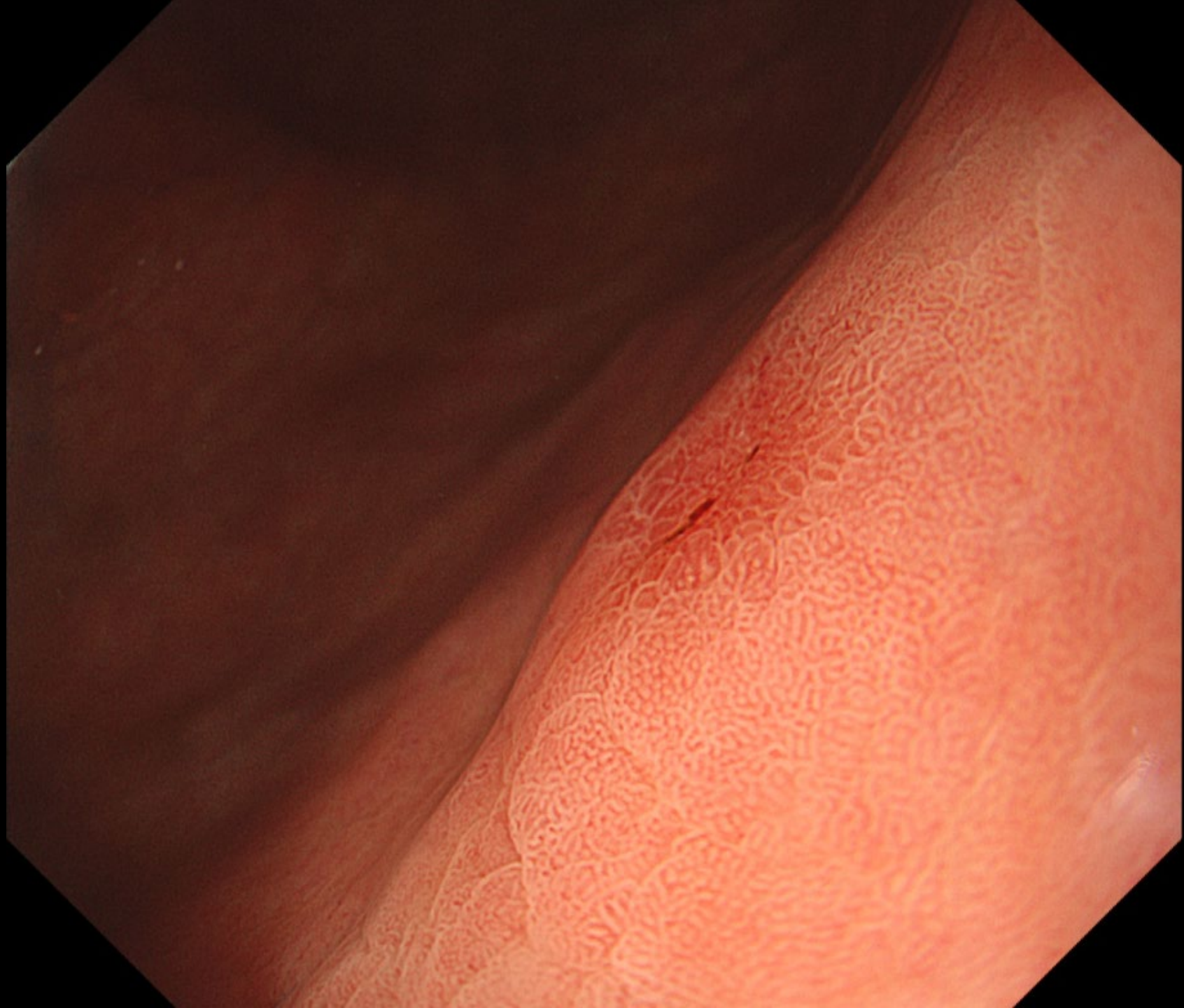
白色光
(4枚)



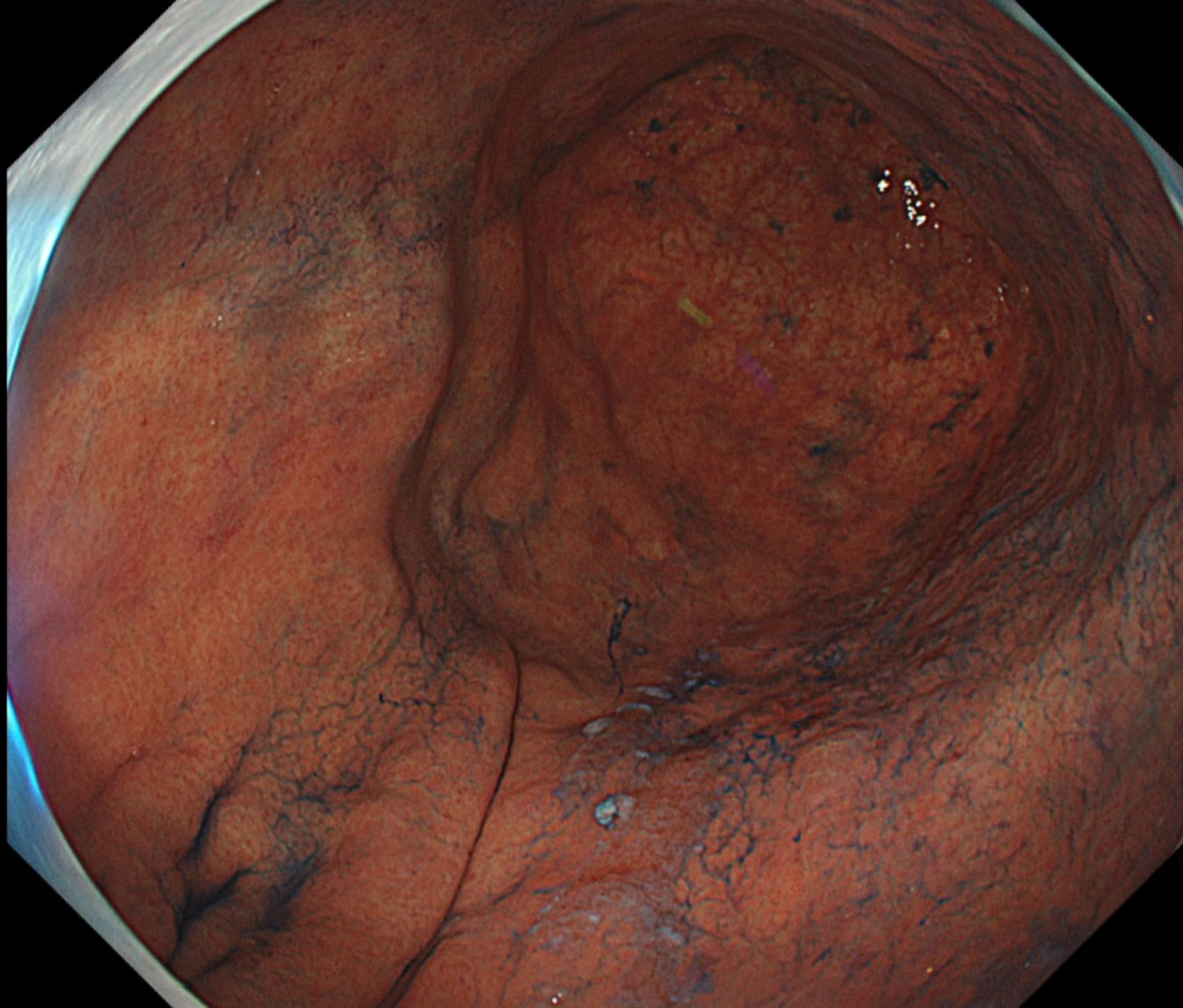


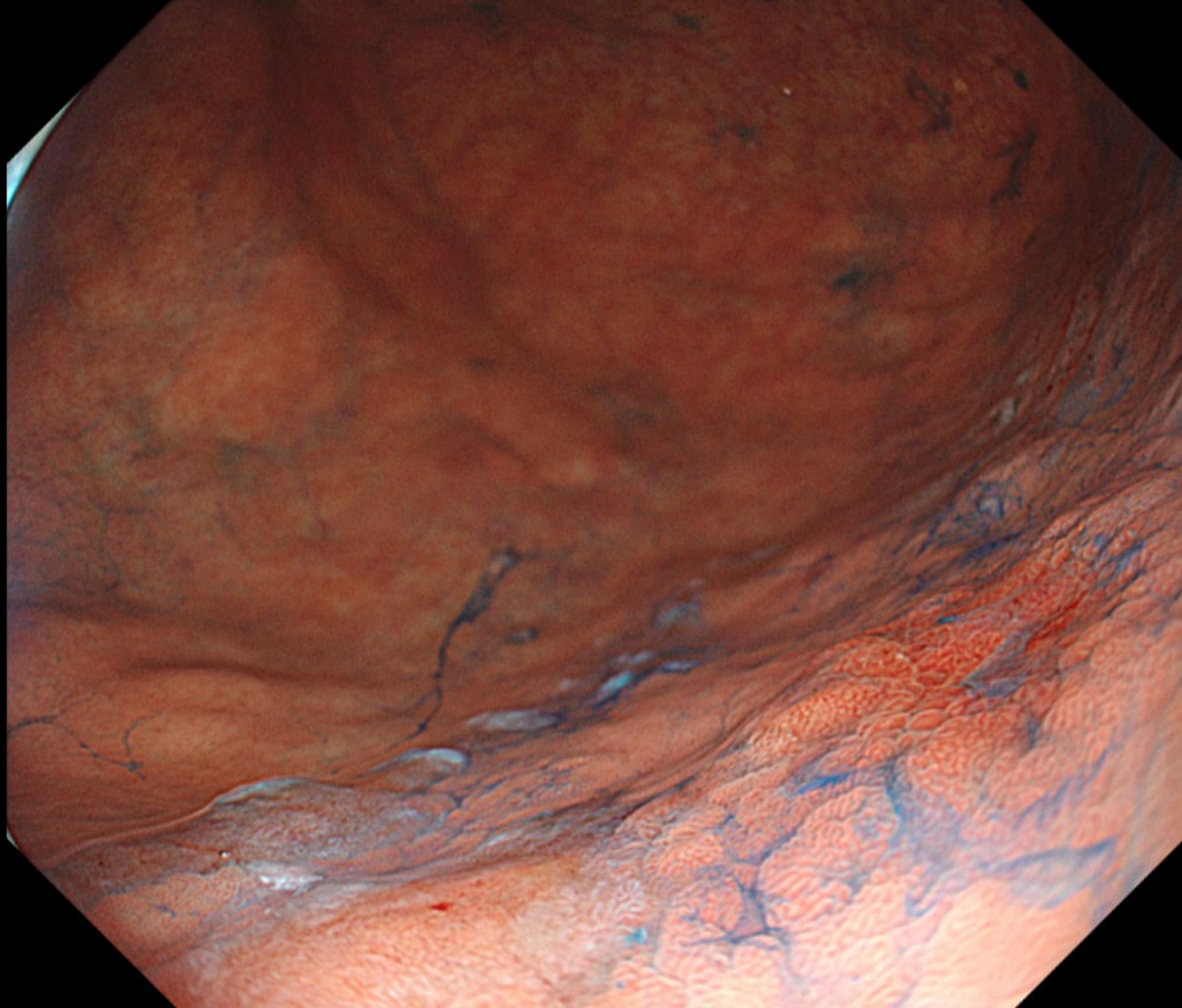


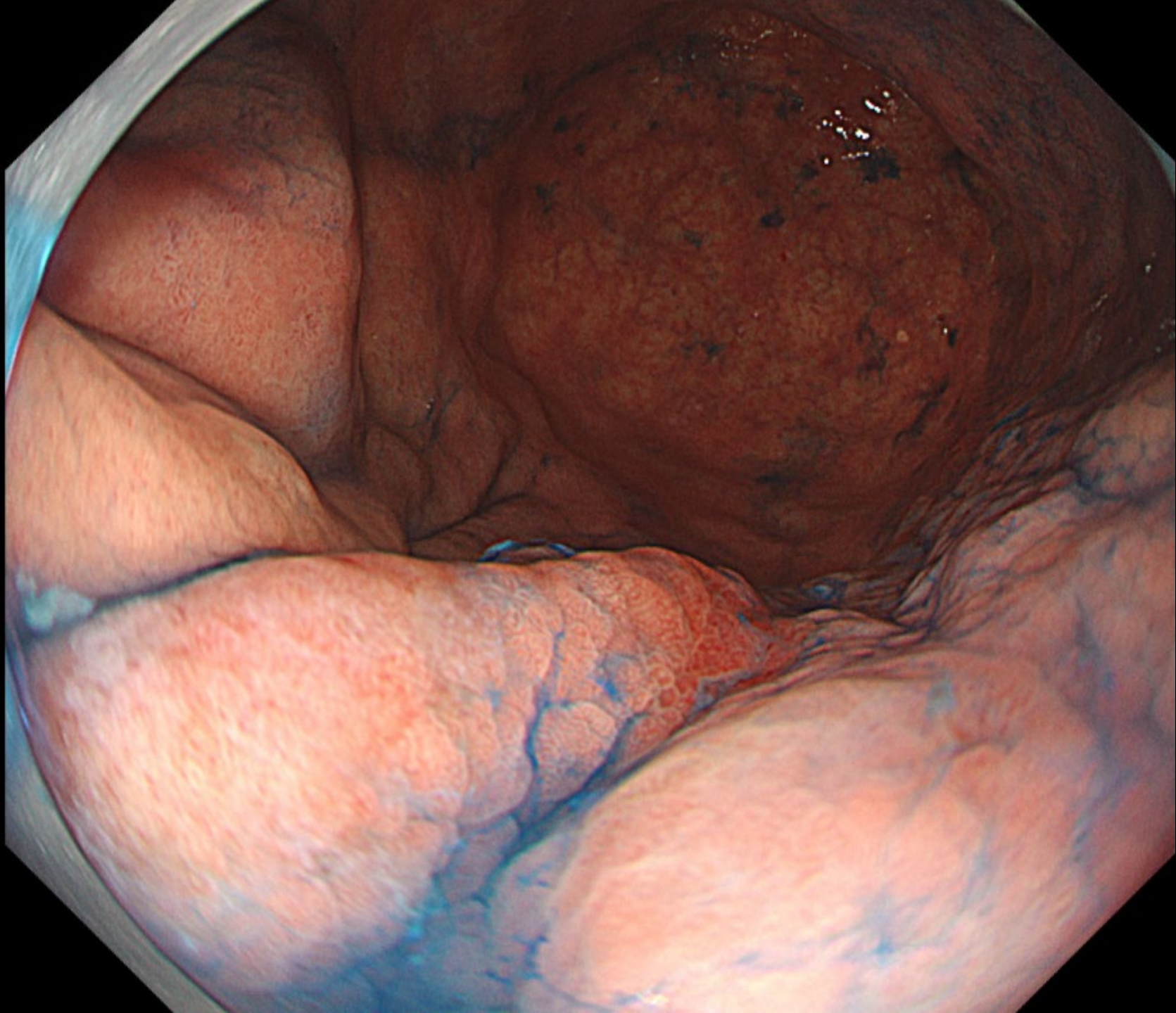




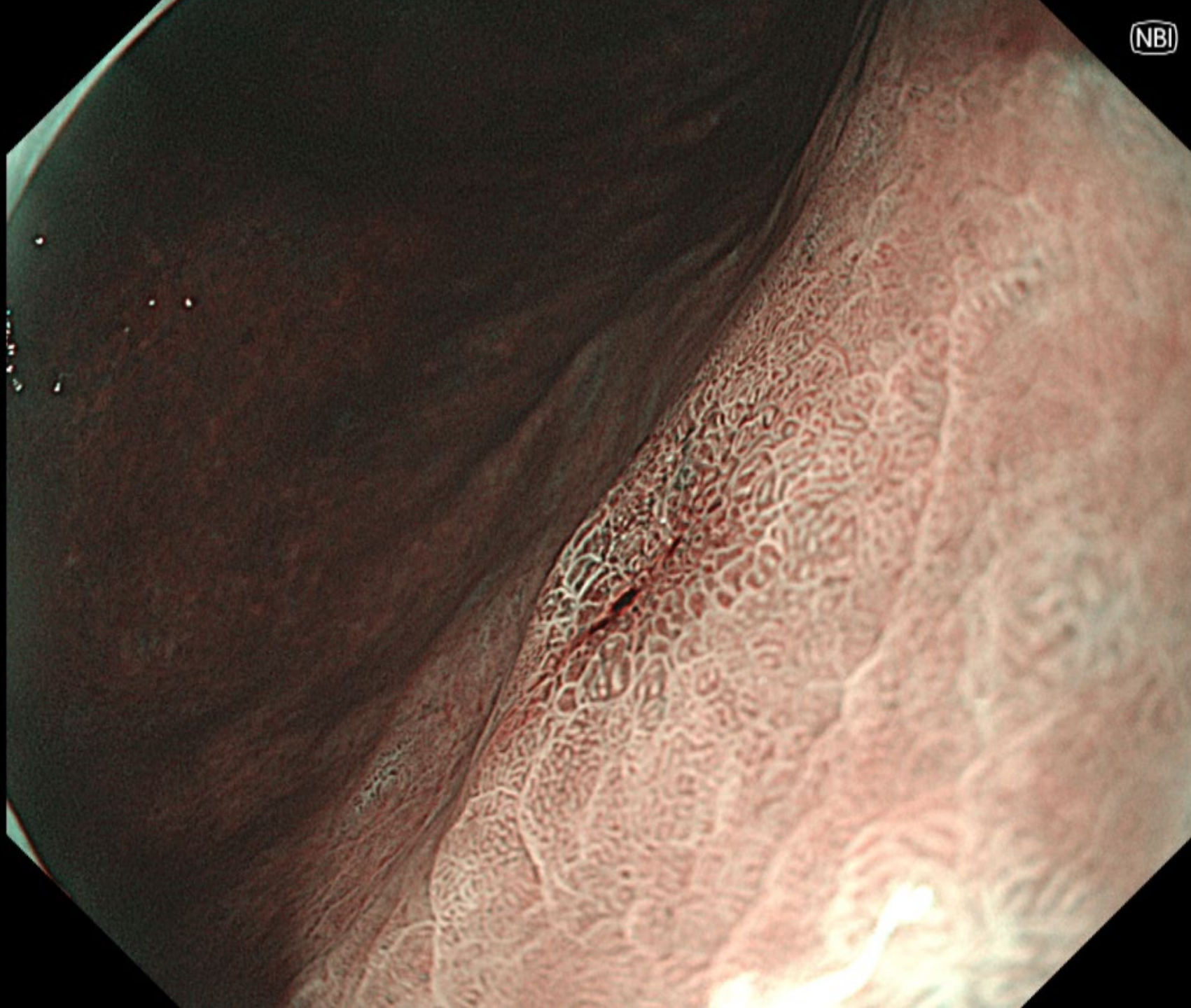
インジゴカルミン散布
(3枚)

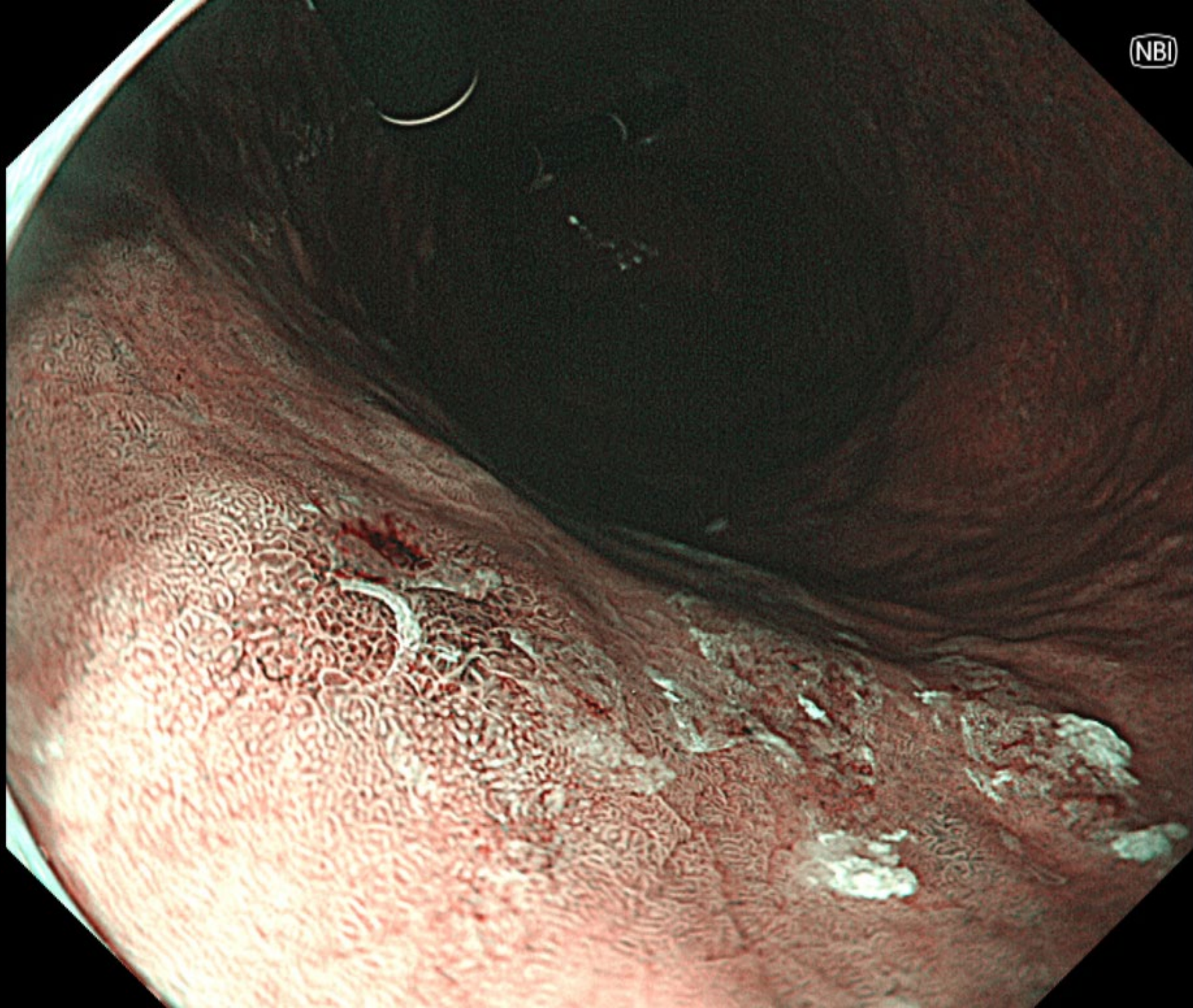


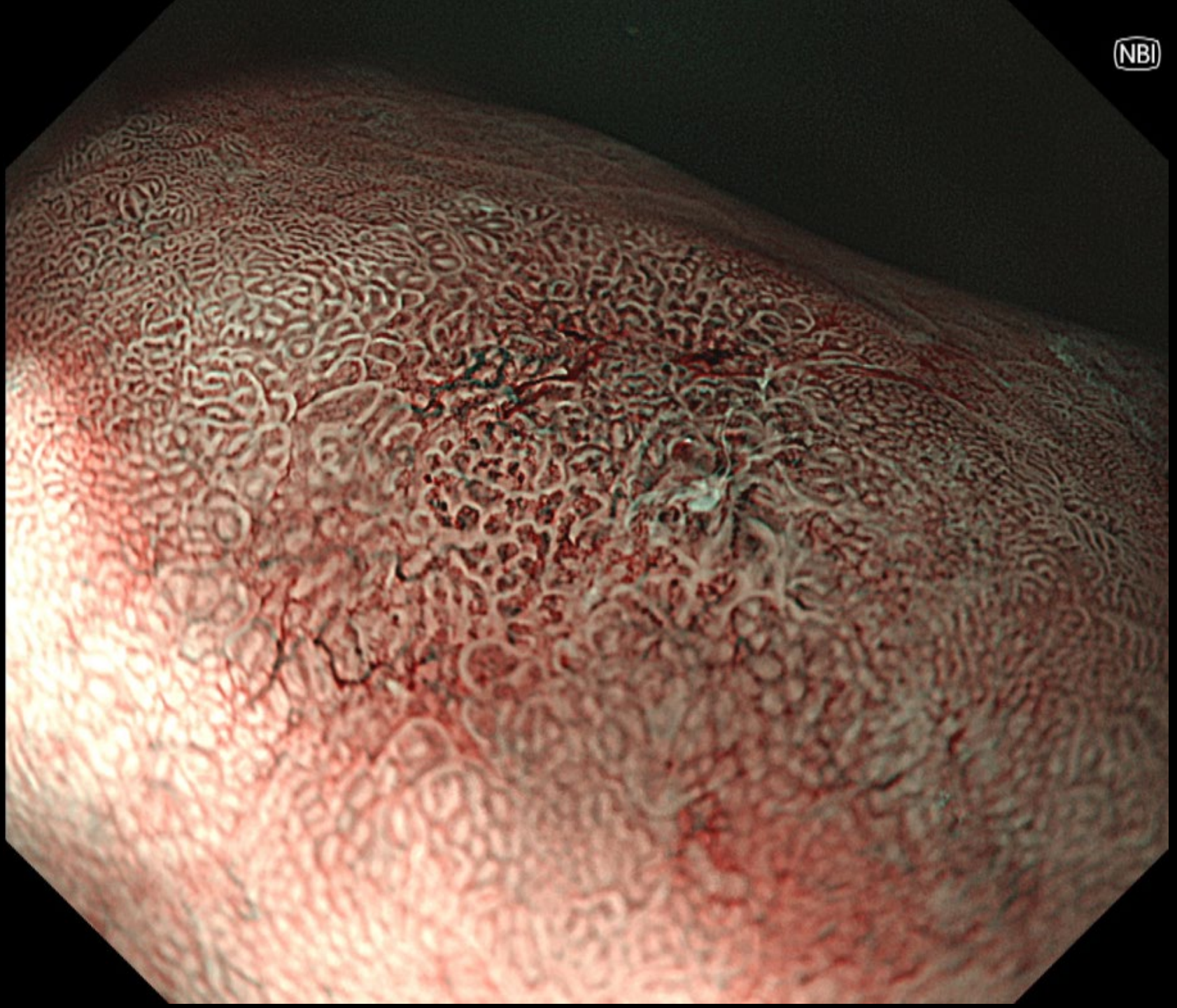




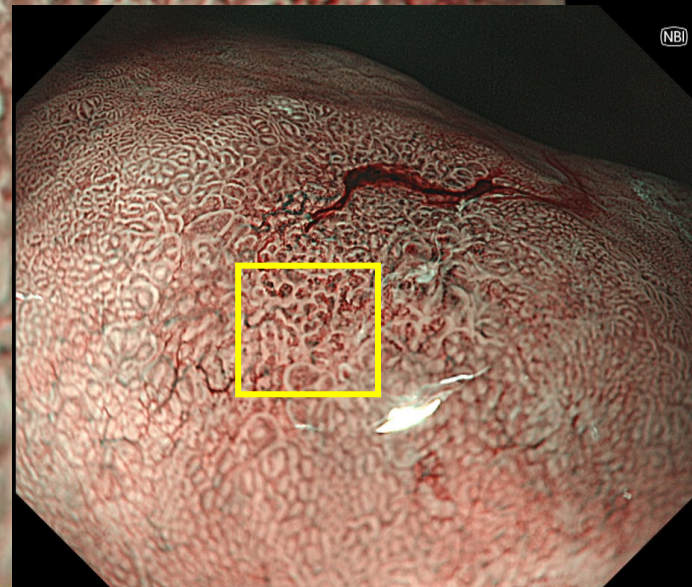
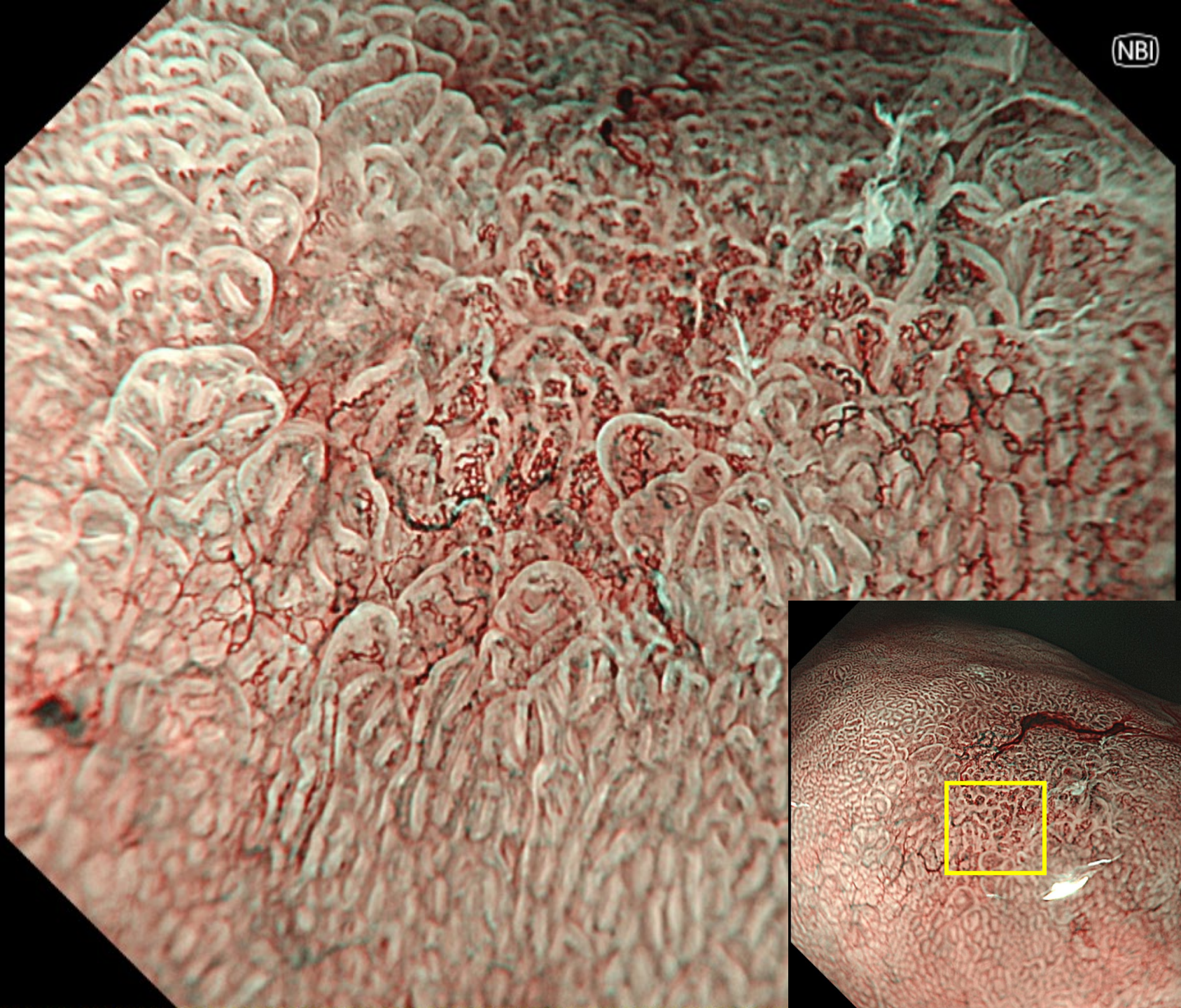
NBI
(7枚)

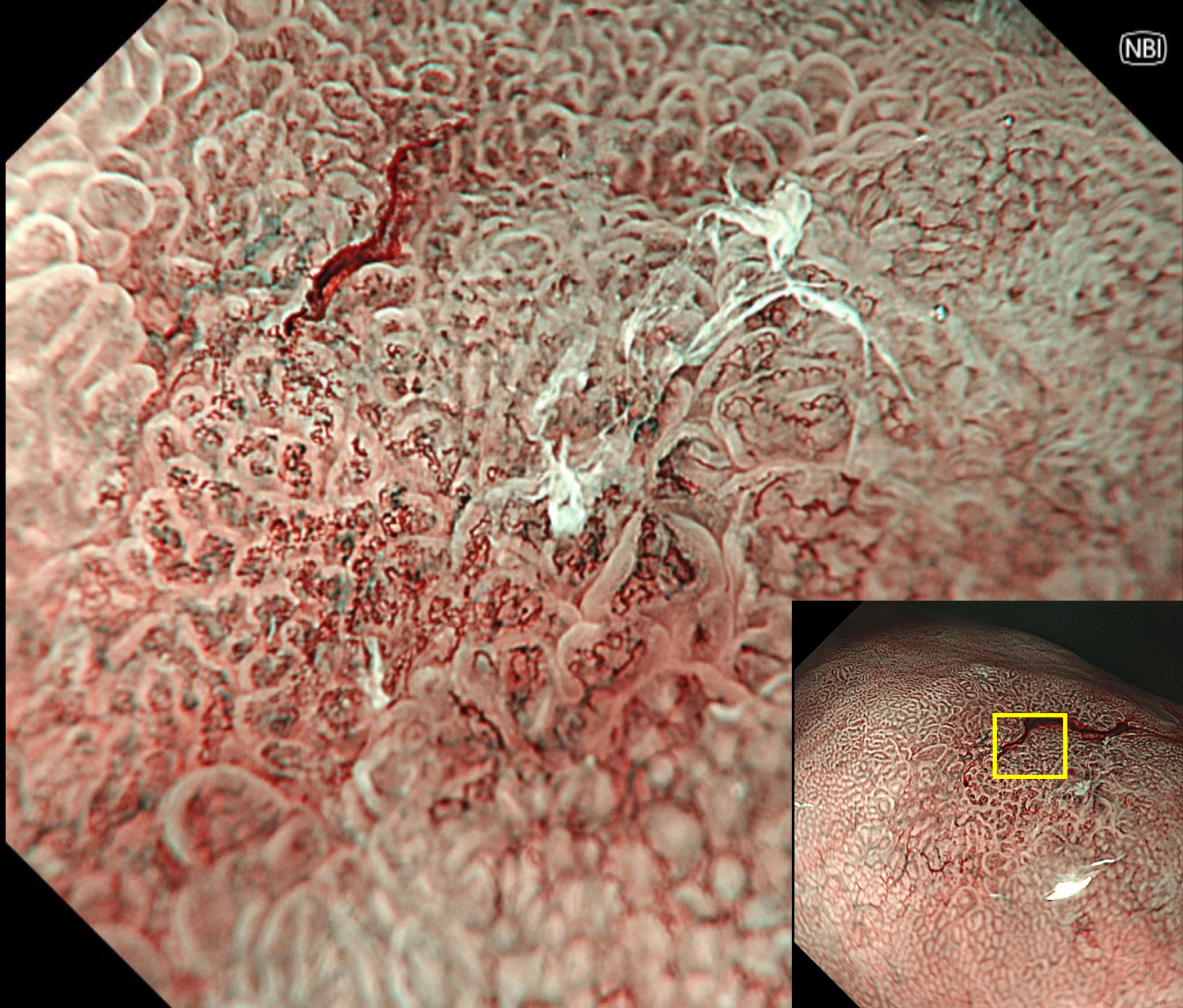




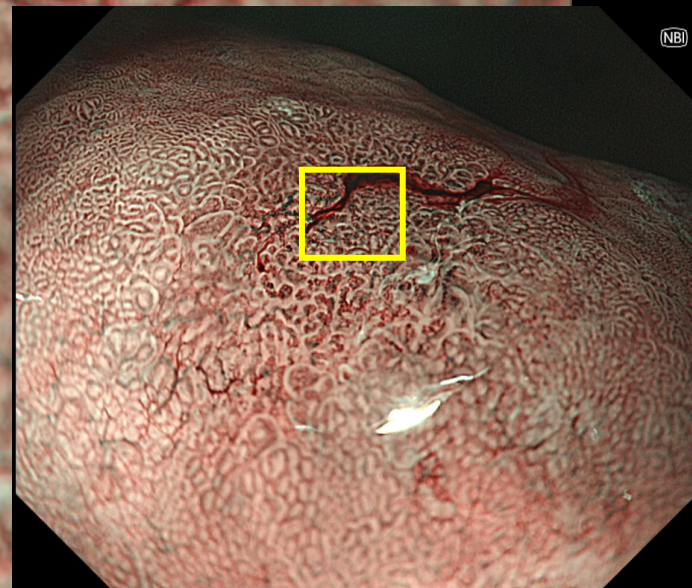








NBI



NBI

内視鏡診断

大きさ: 8mm 肉眼型: 0-II c, 分化型

深達度: M, UL0,

NBI観察: DL +,

微小血管構造: irregular,

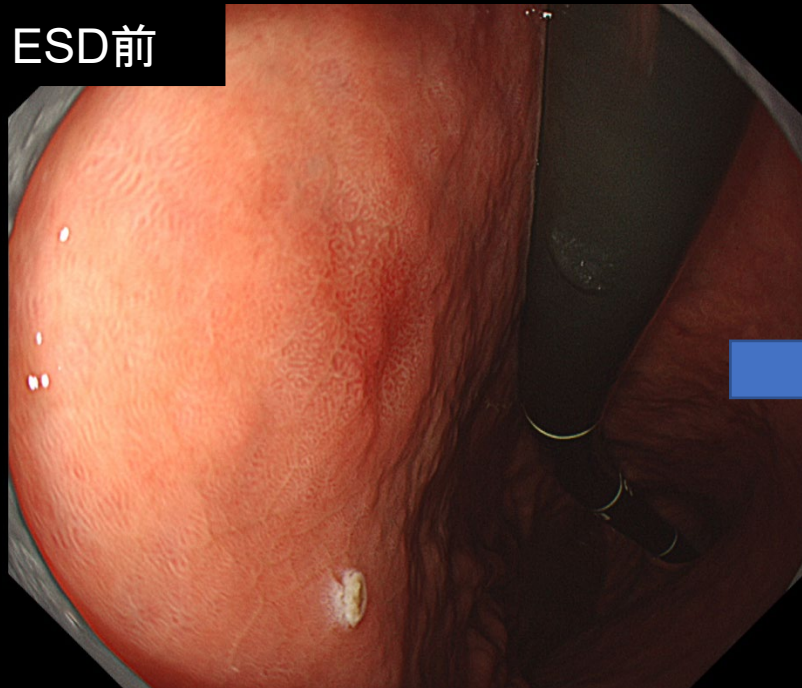
表面微細構造: irregular

→絶対適応病変としてESD実施の方針

ESD



ESD前

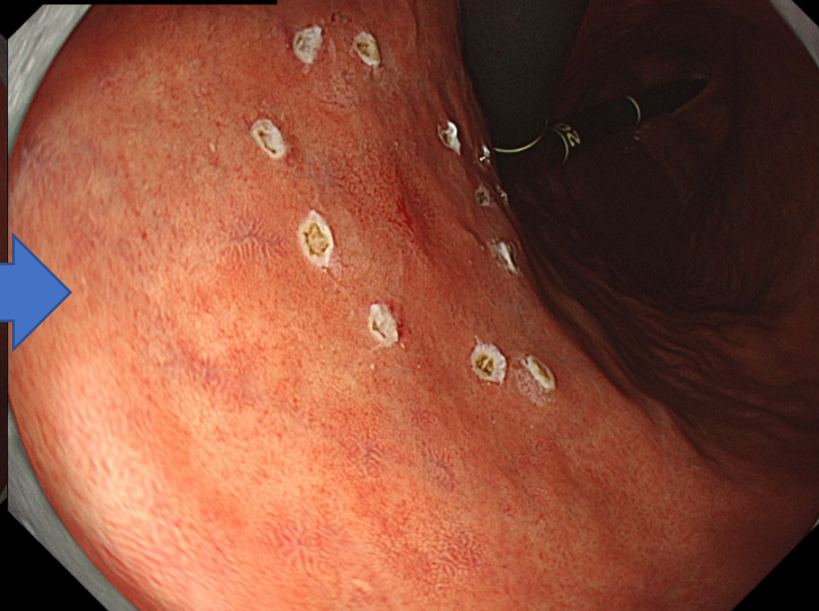




ESD前



マーキング





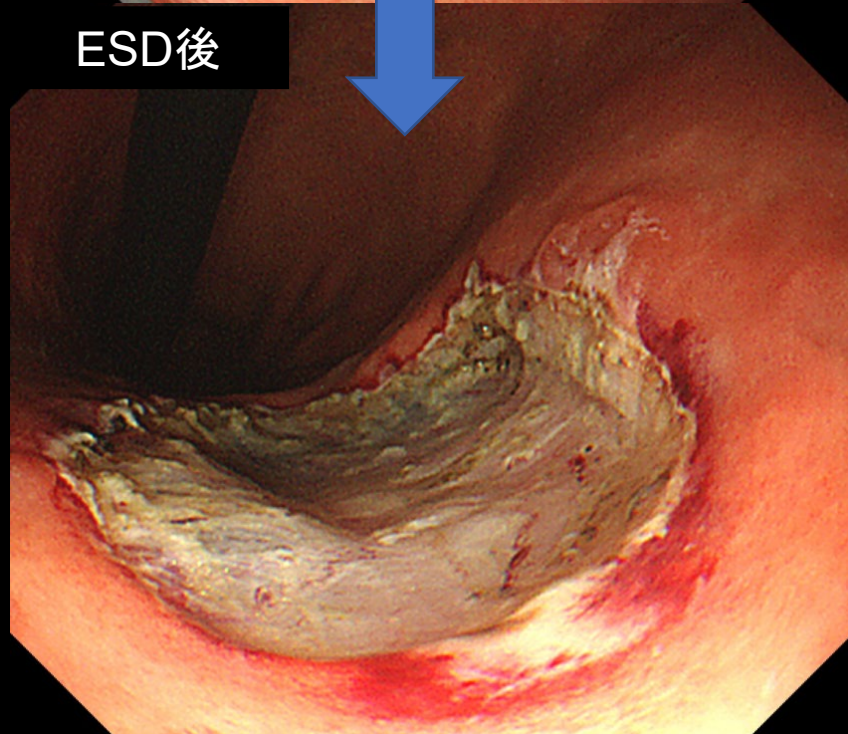
ESD前

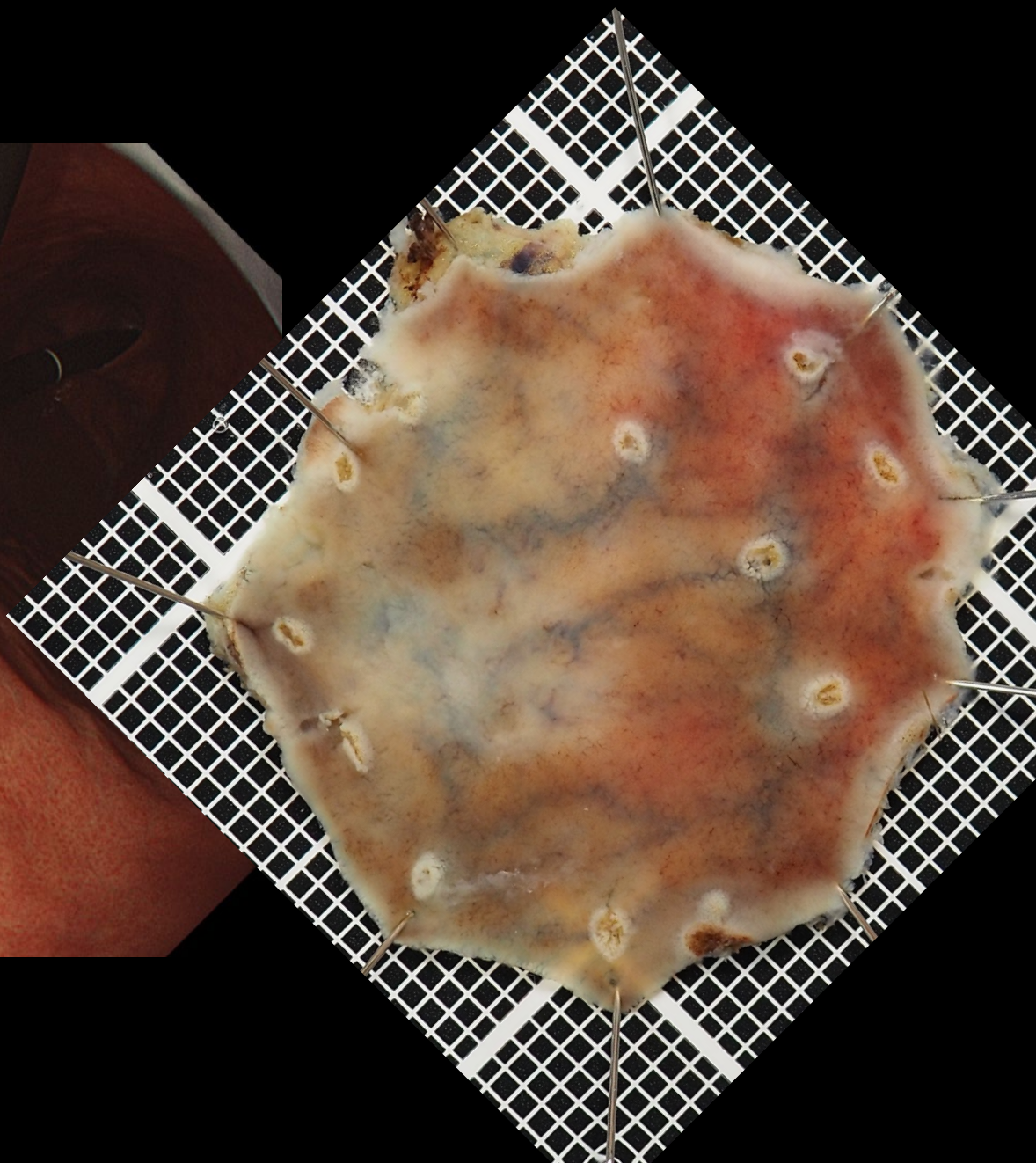
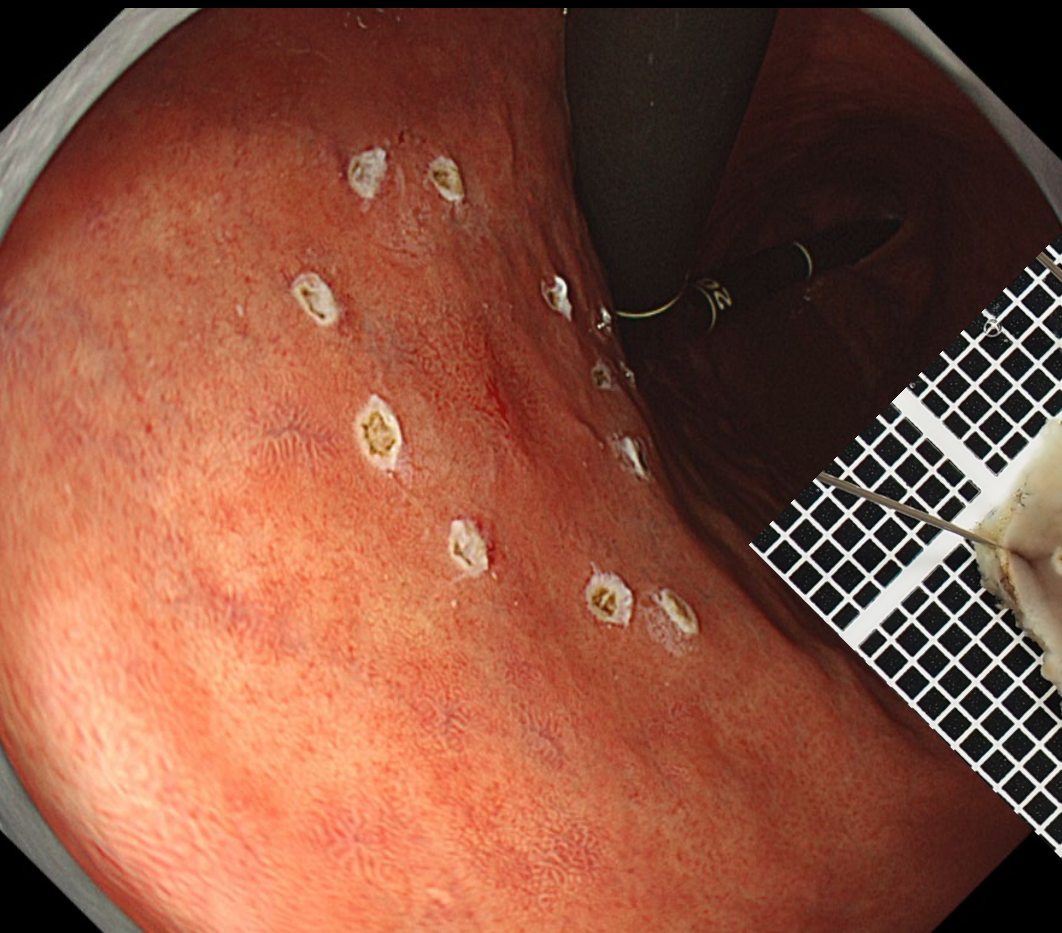


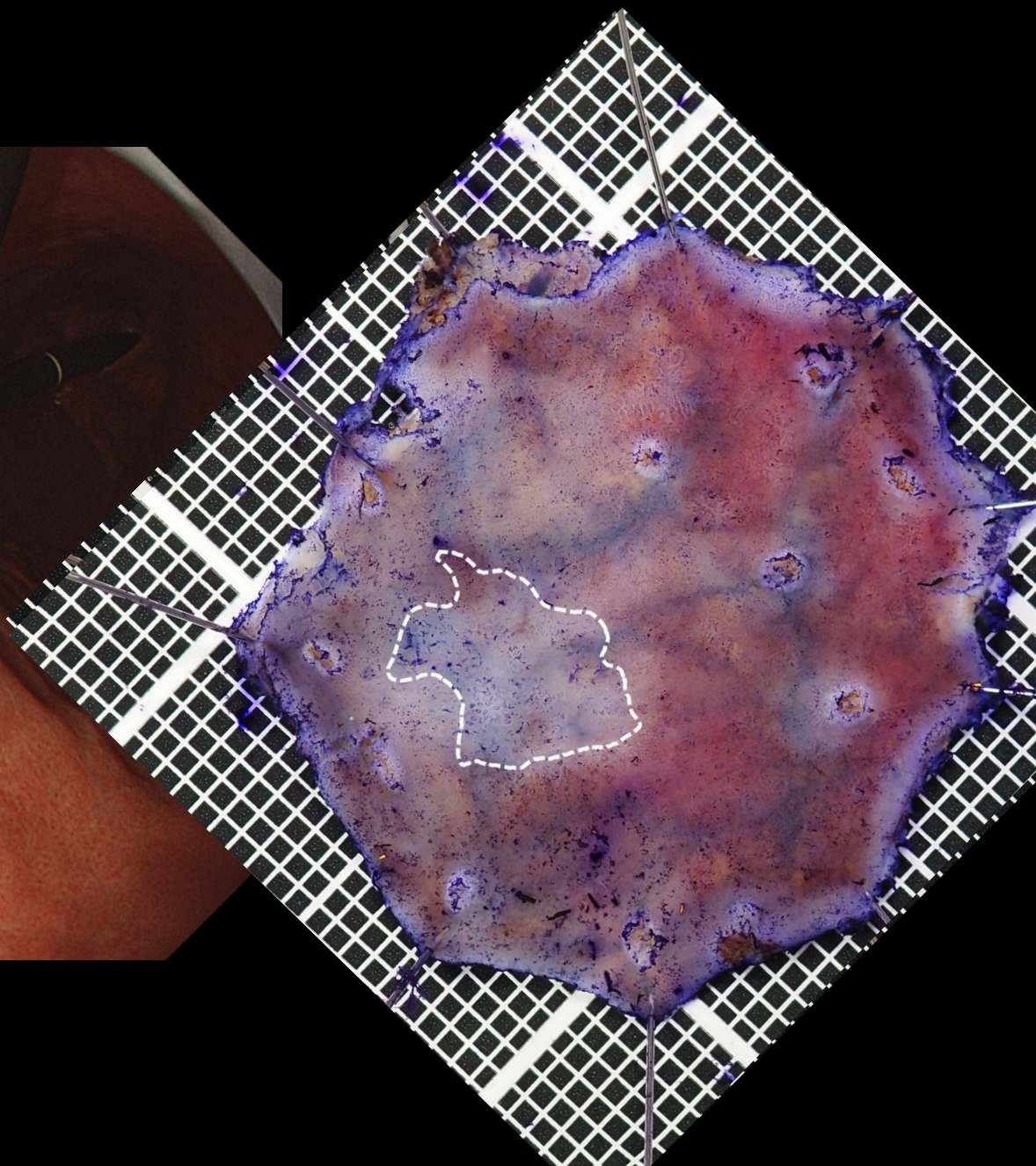
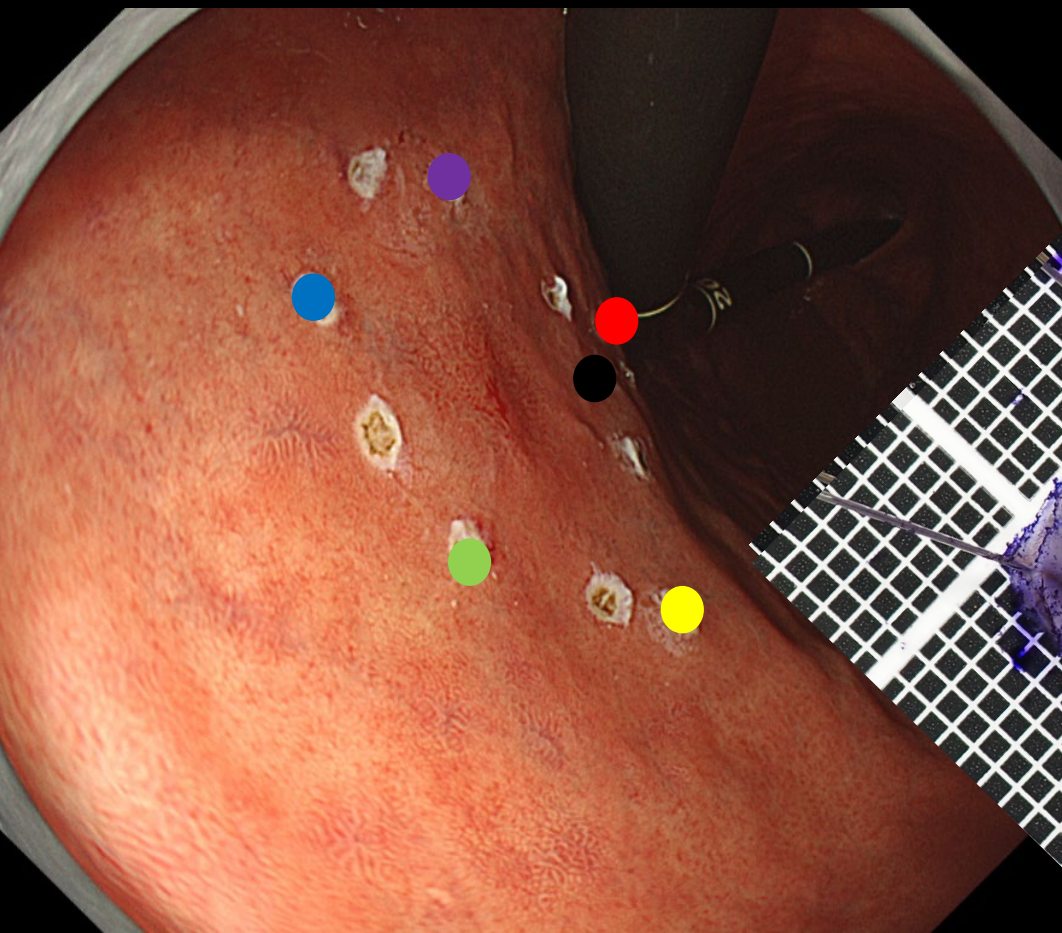
マーキング

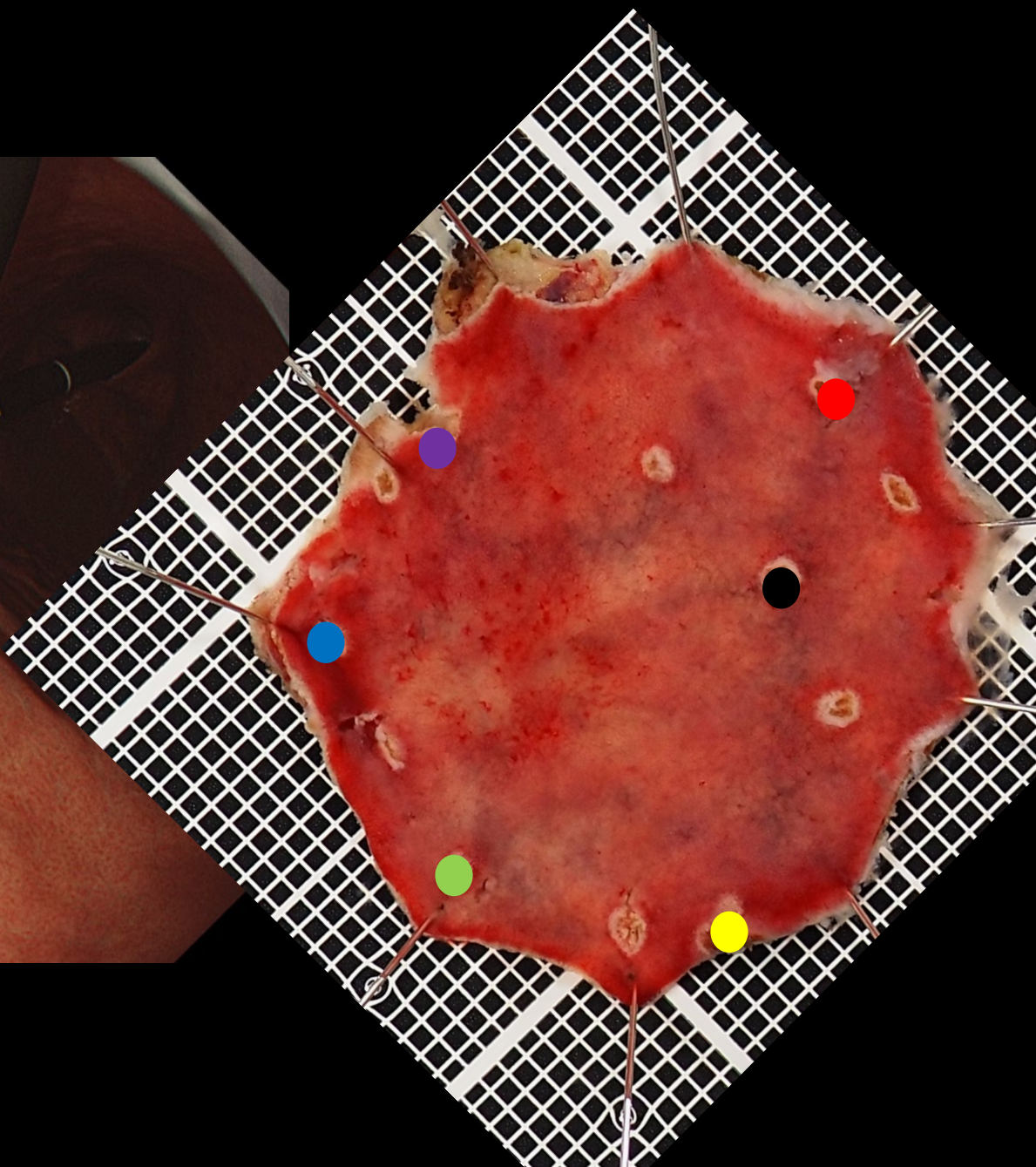
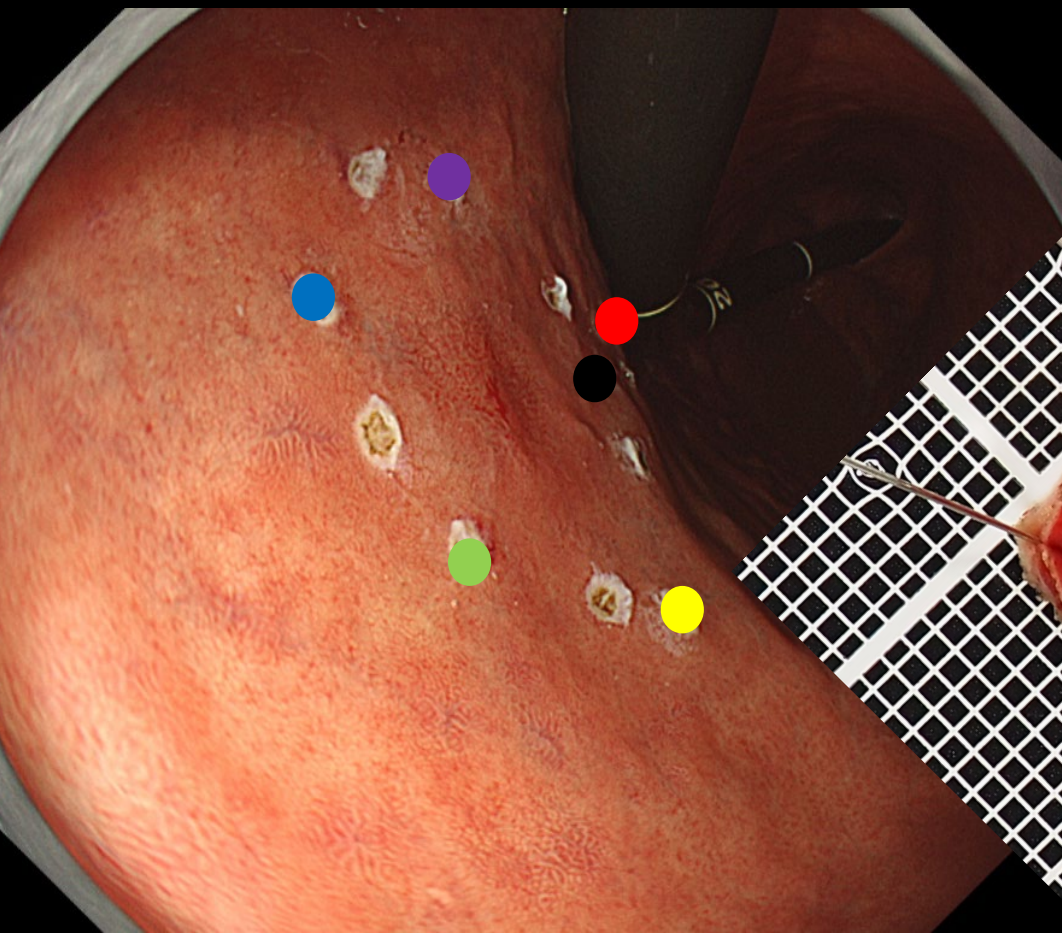


ESD後



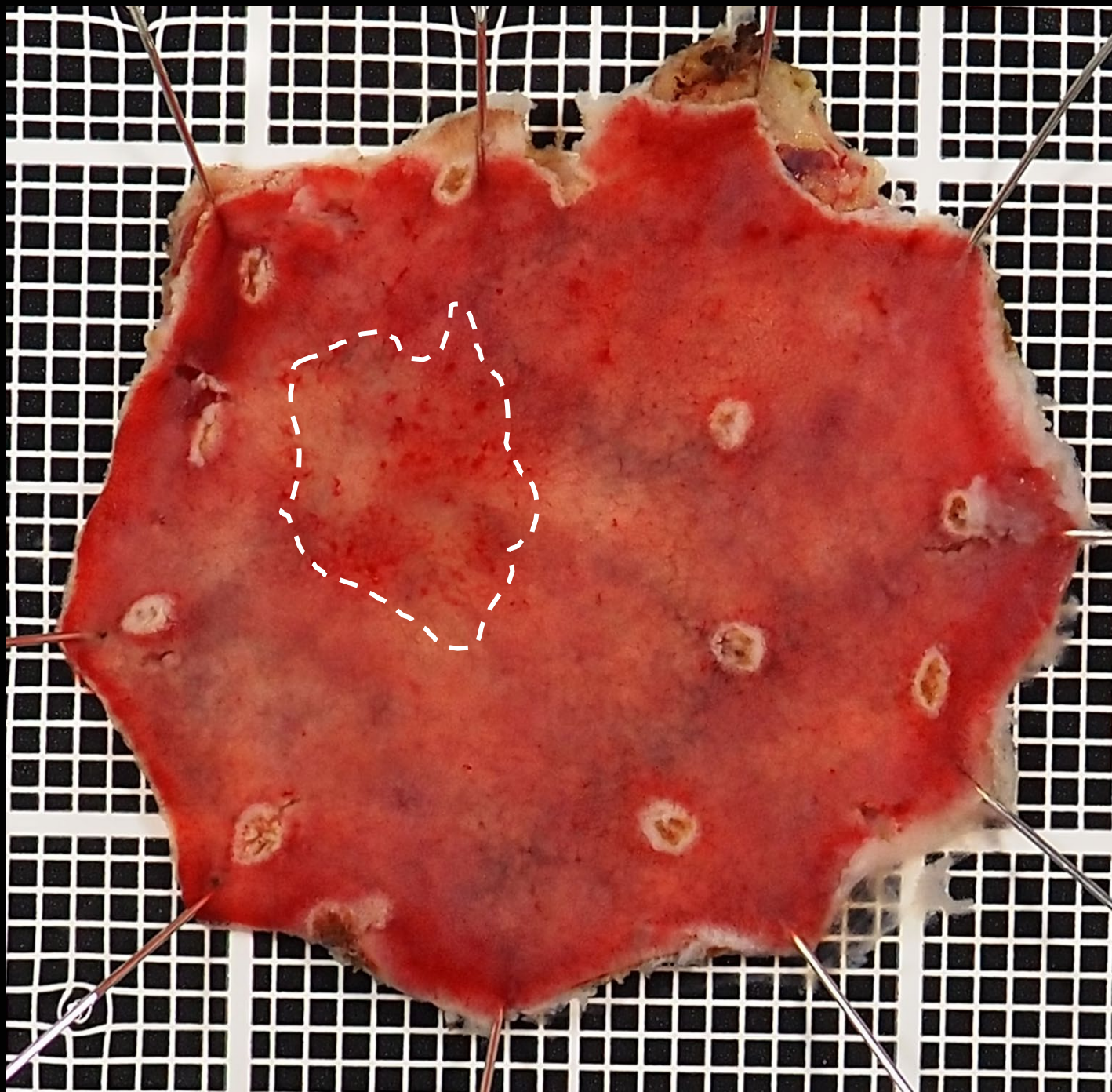








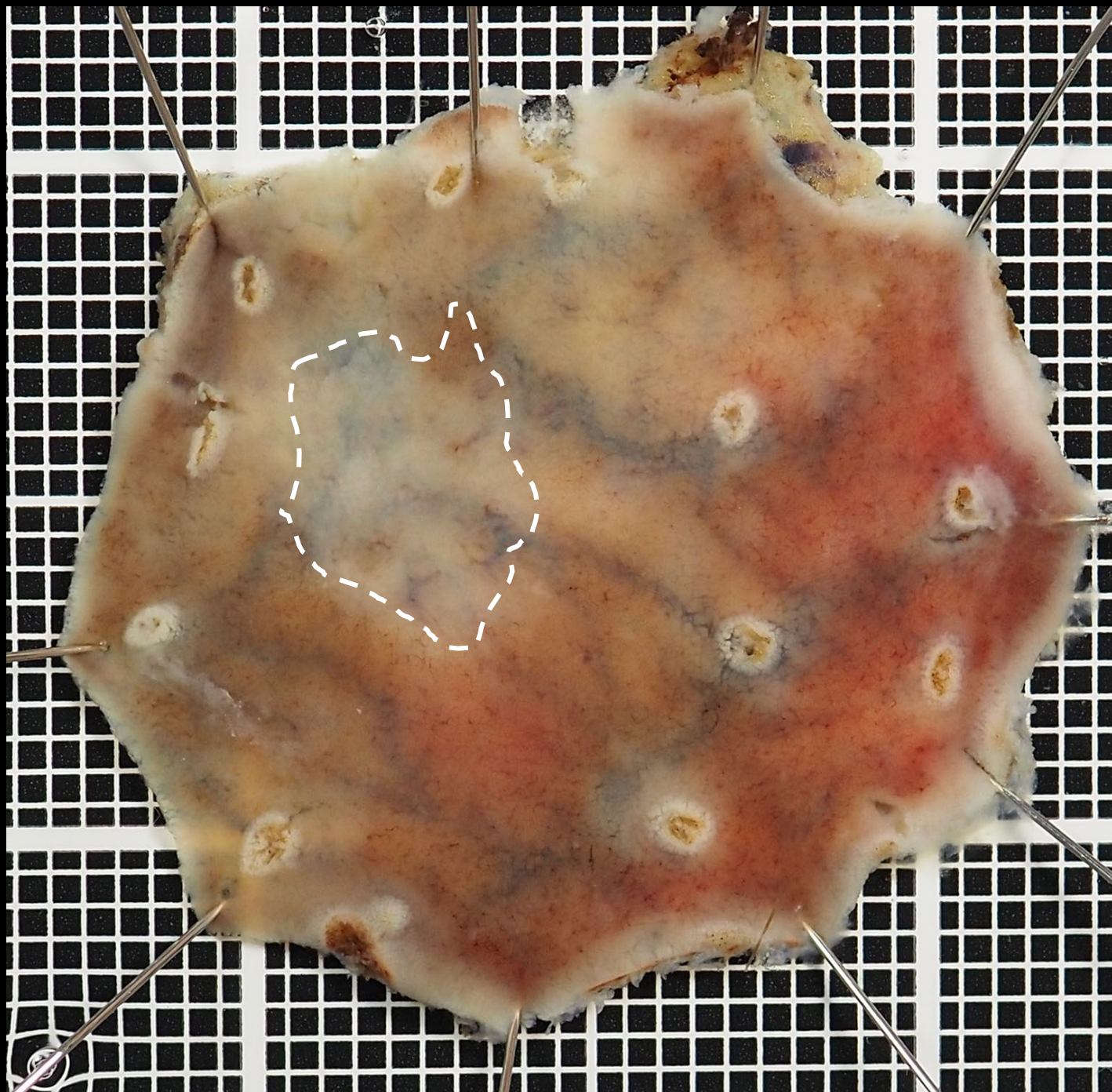
肛門側



口側



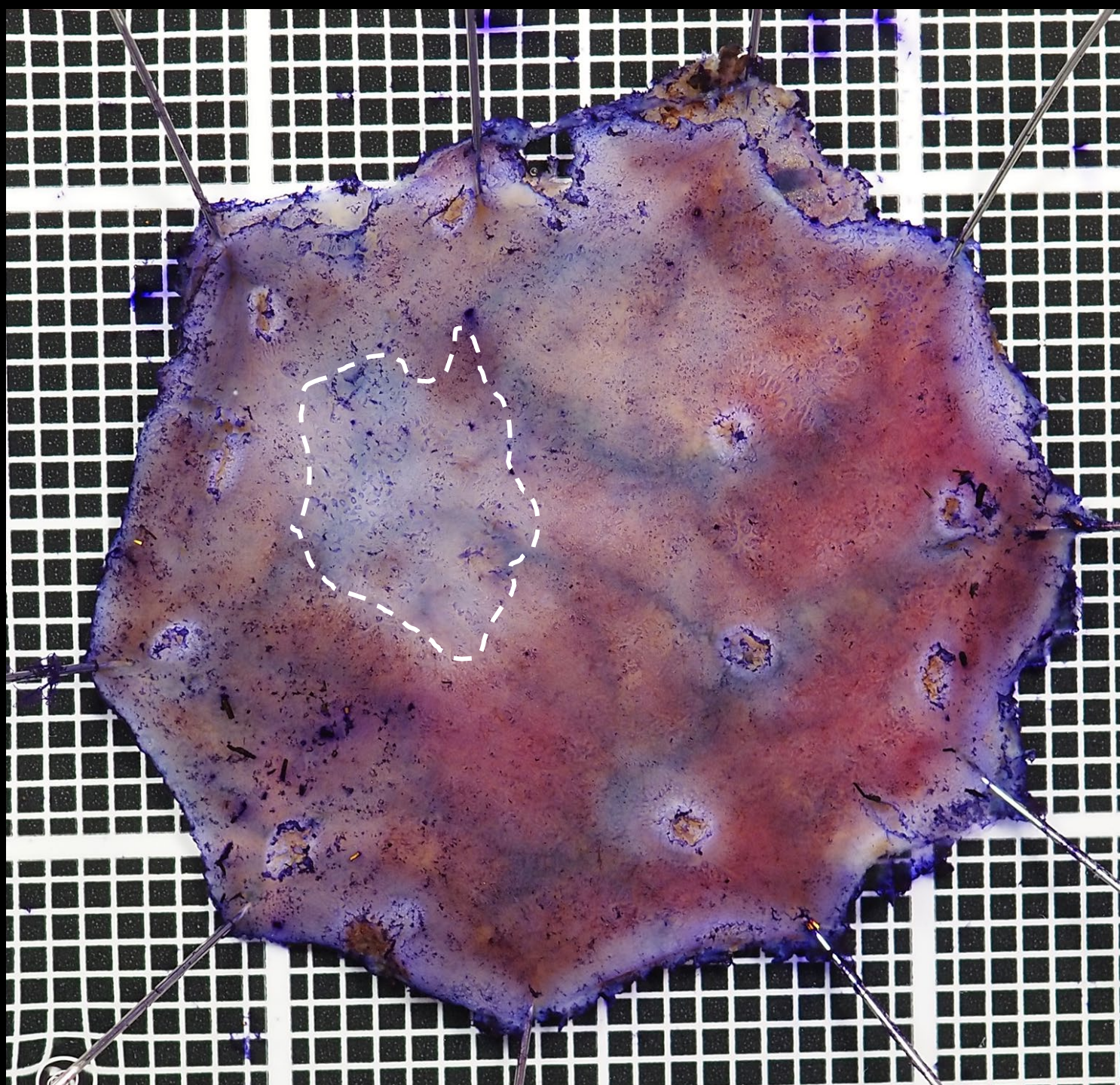
肛門側



口側

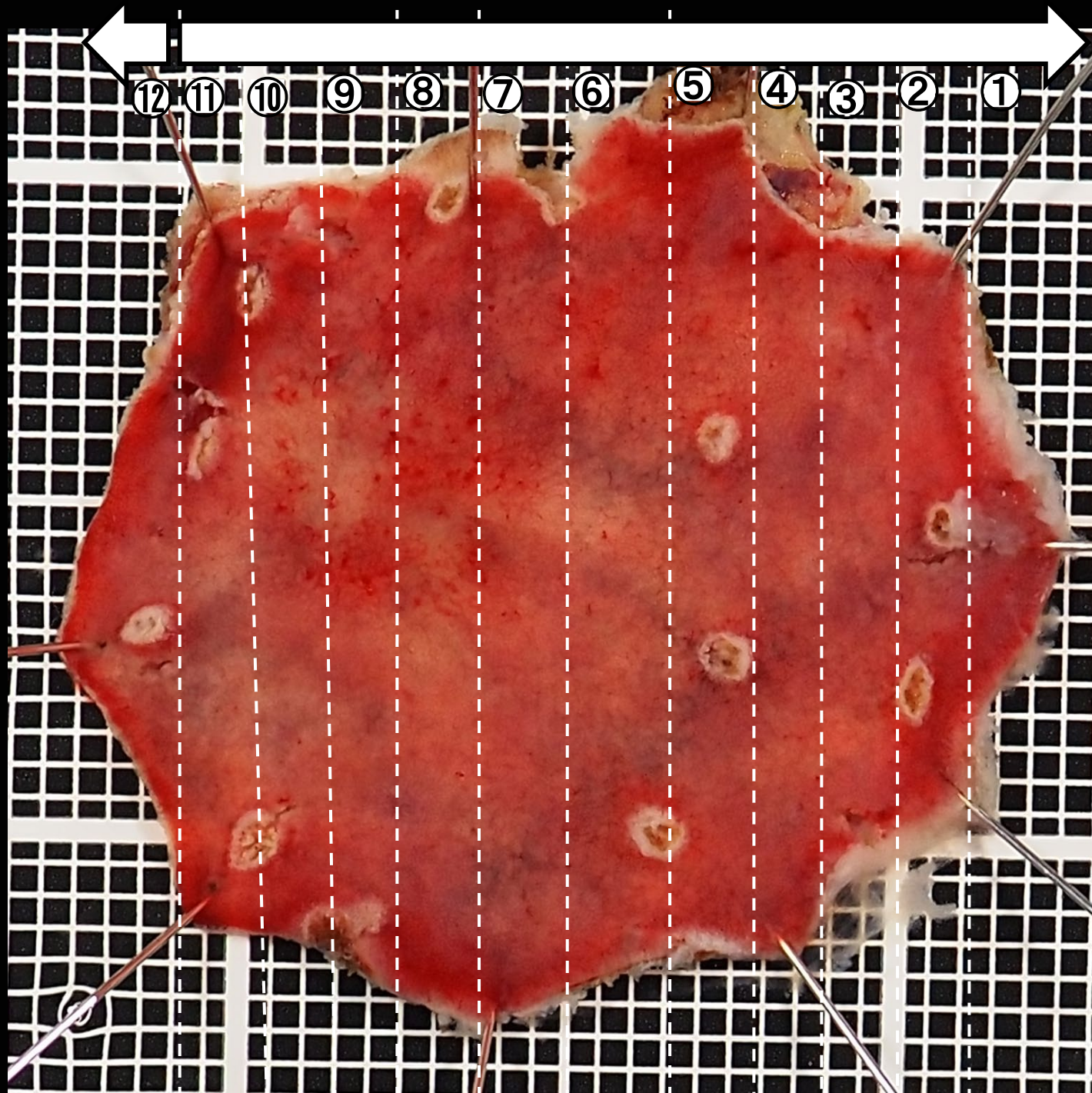


肛門側



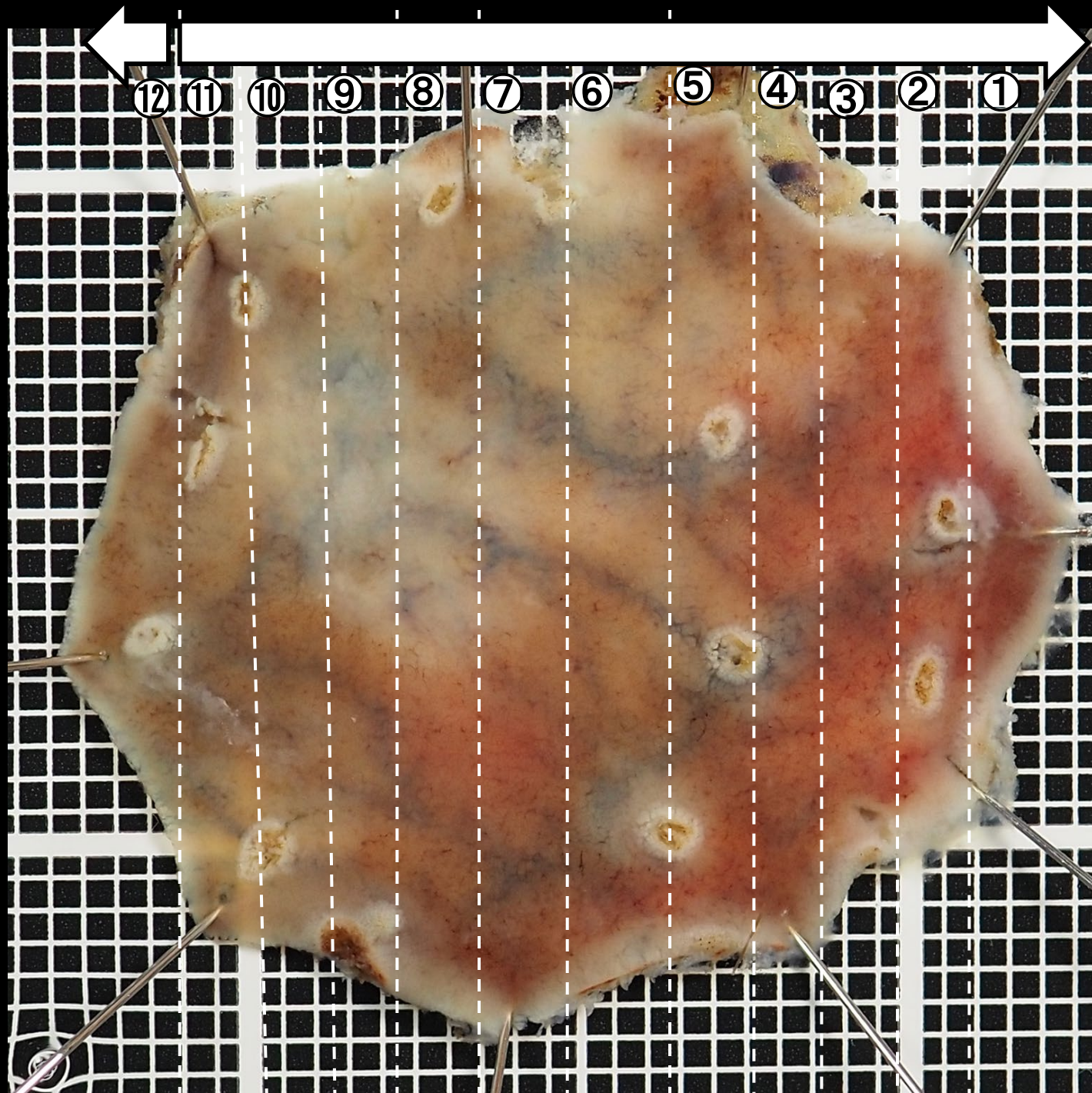
口側

←
肛門側

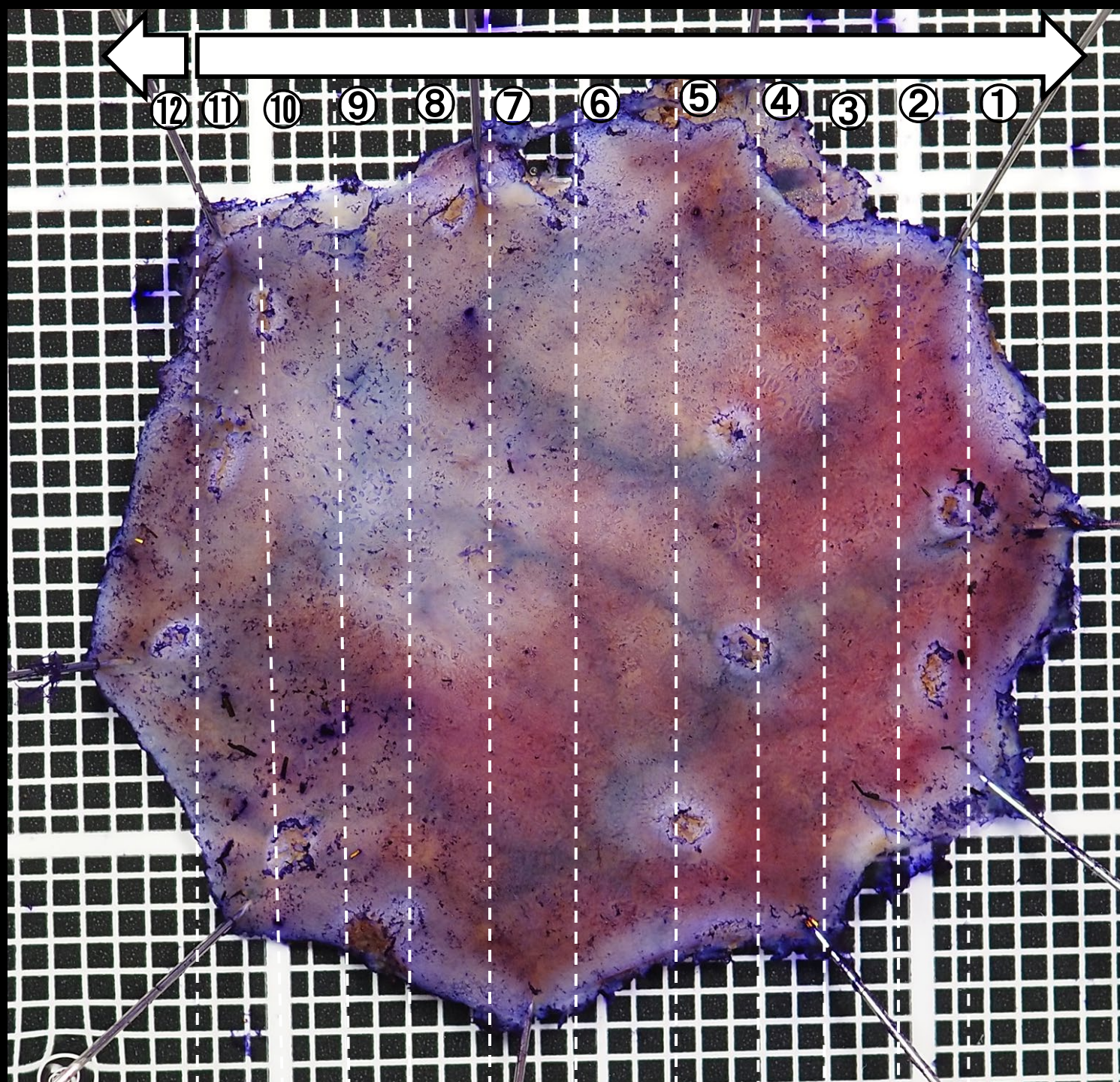


→
口側

←
肛門側



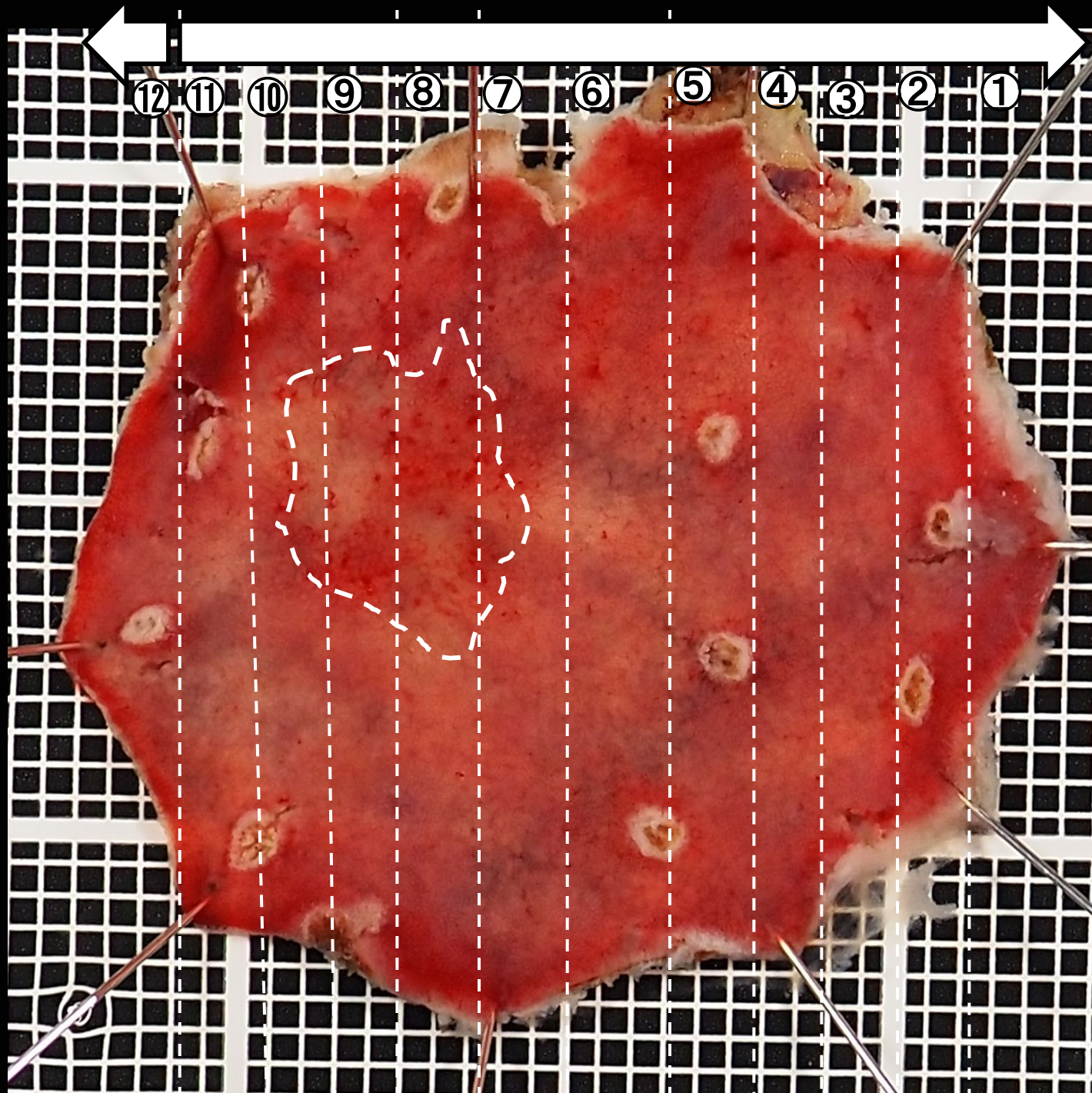
→
口側



肛門側

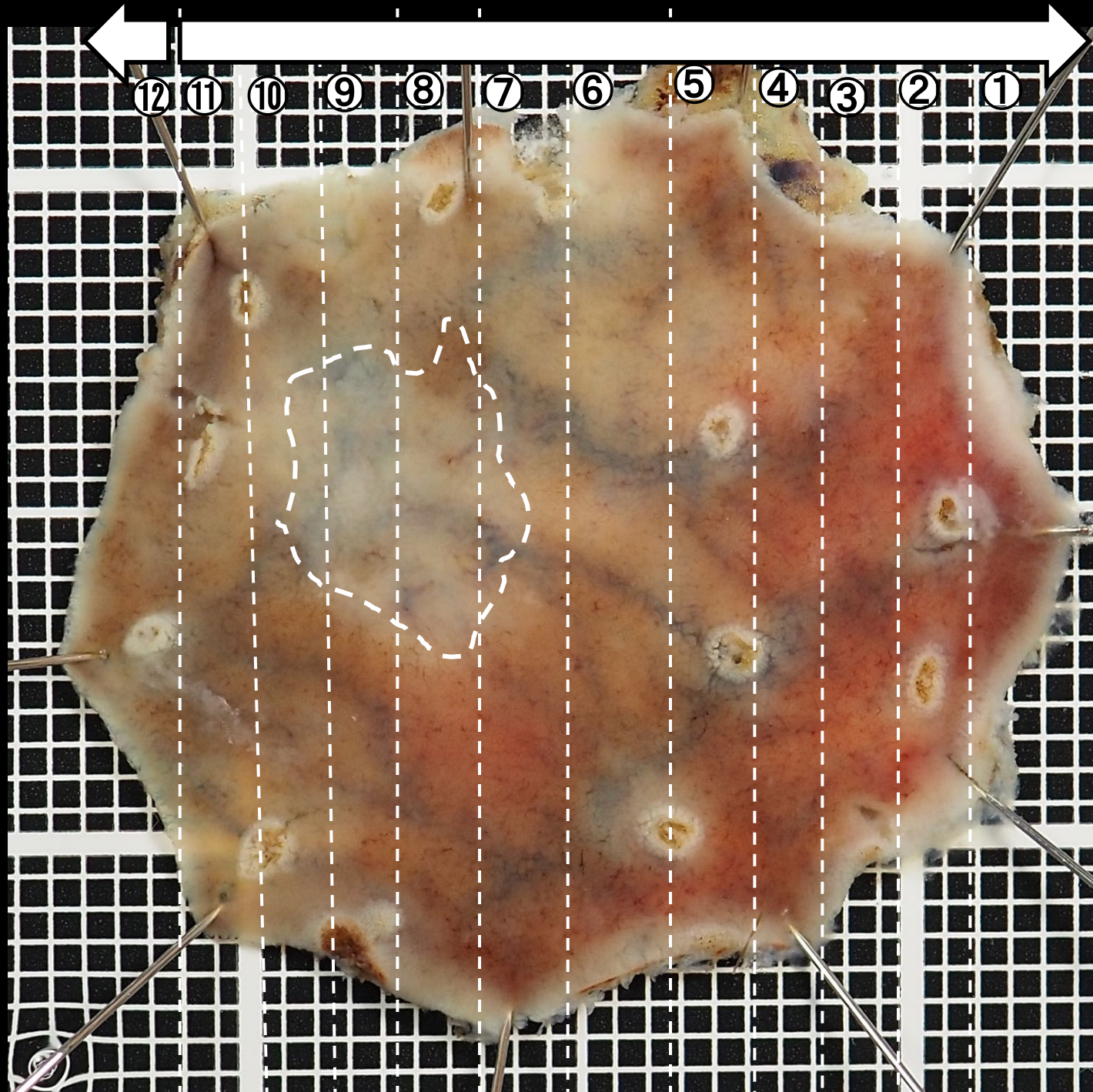
口側

←
肛門側

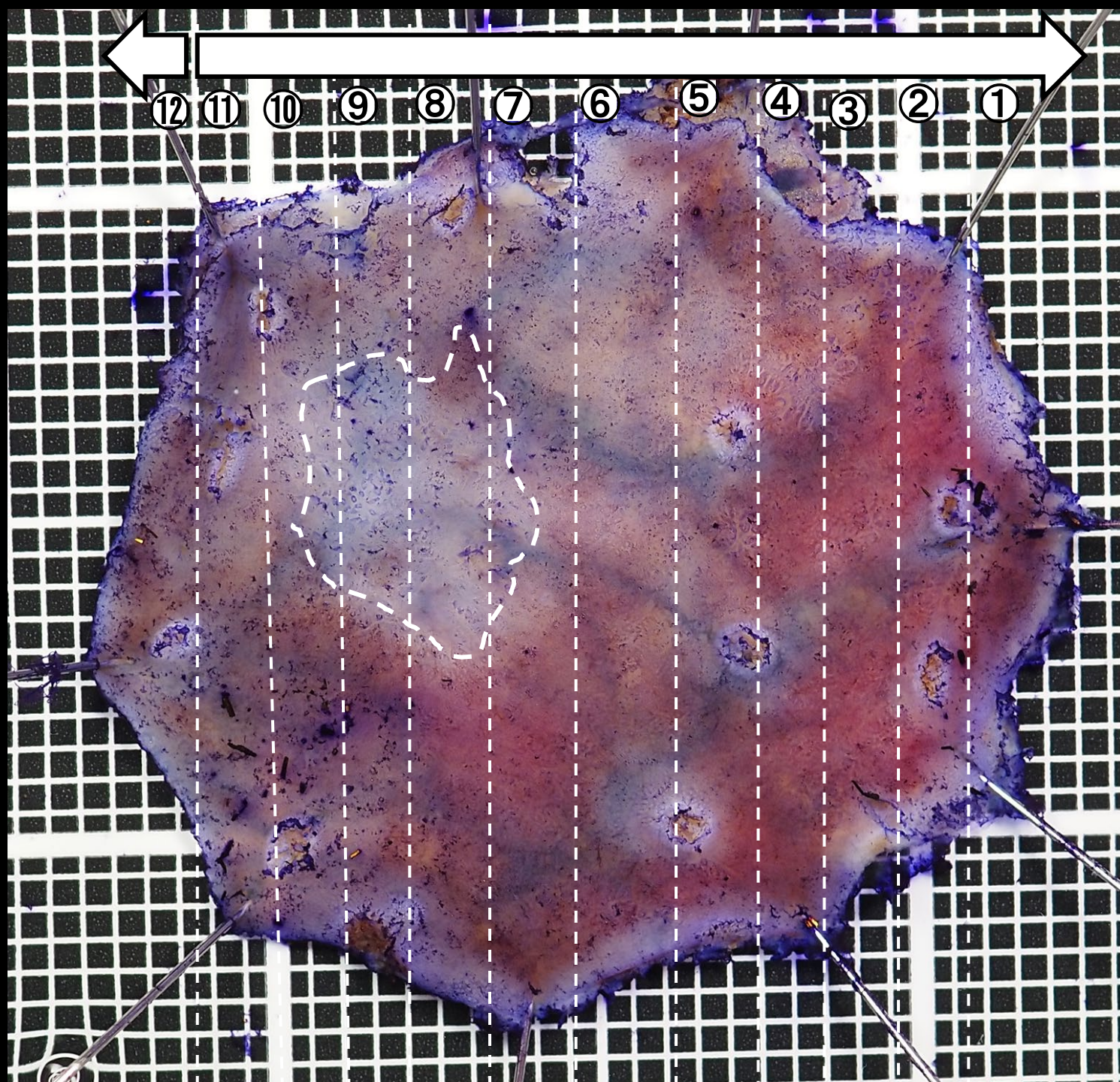


→
口側

←
肛門側



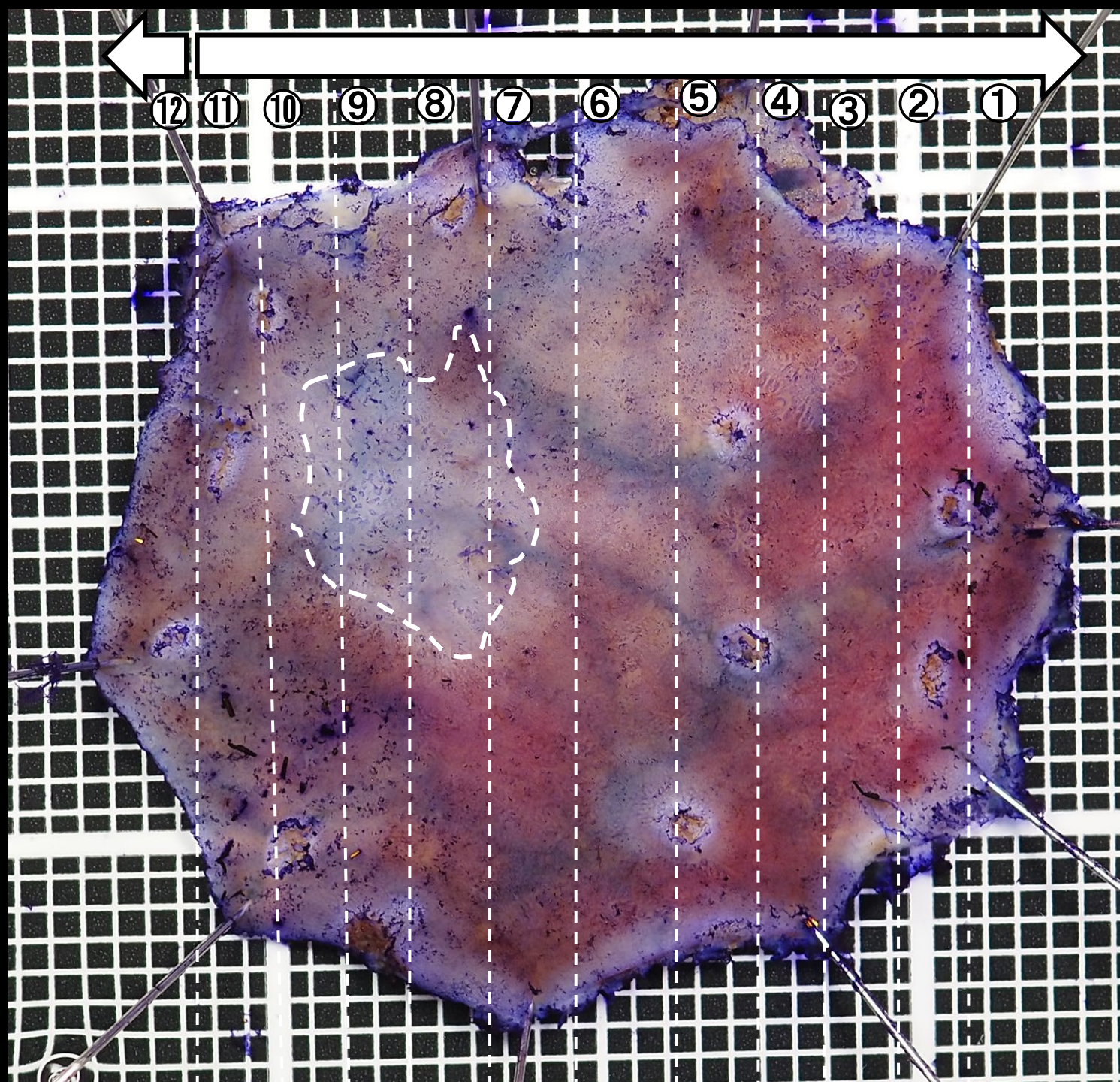
→
口側



肛門側

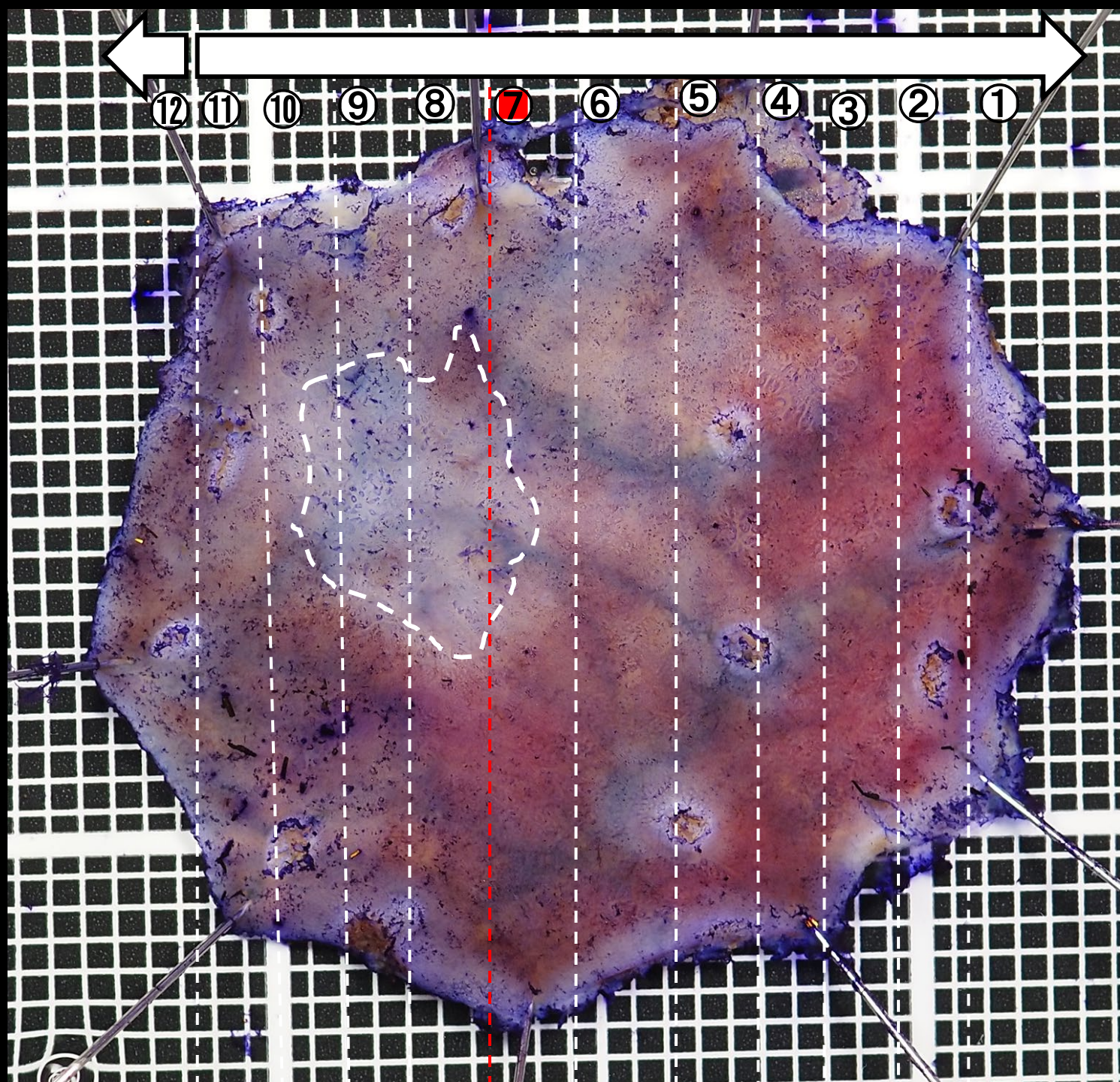
口側

Key Slice



肛門側

口側



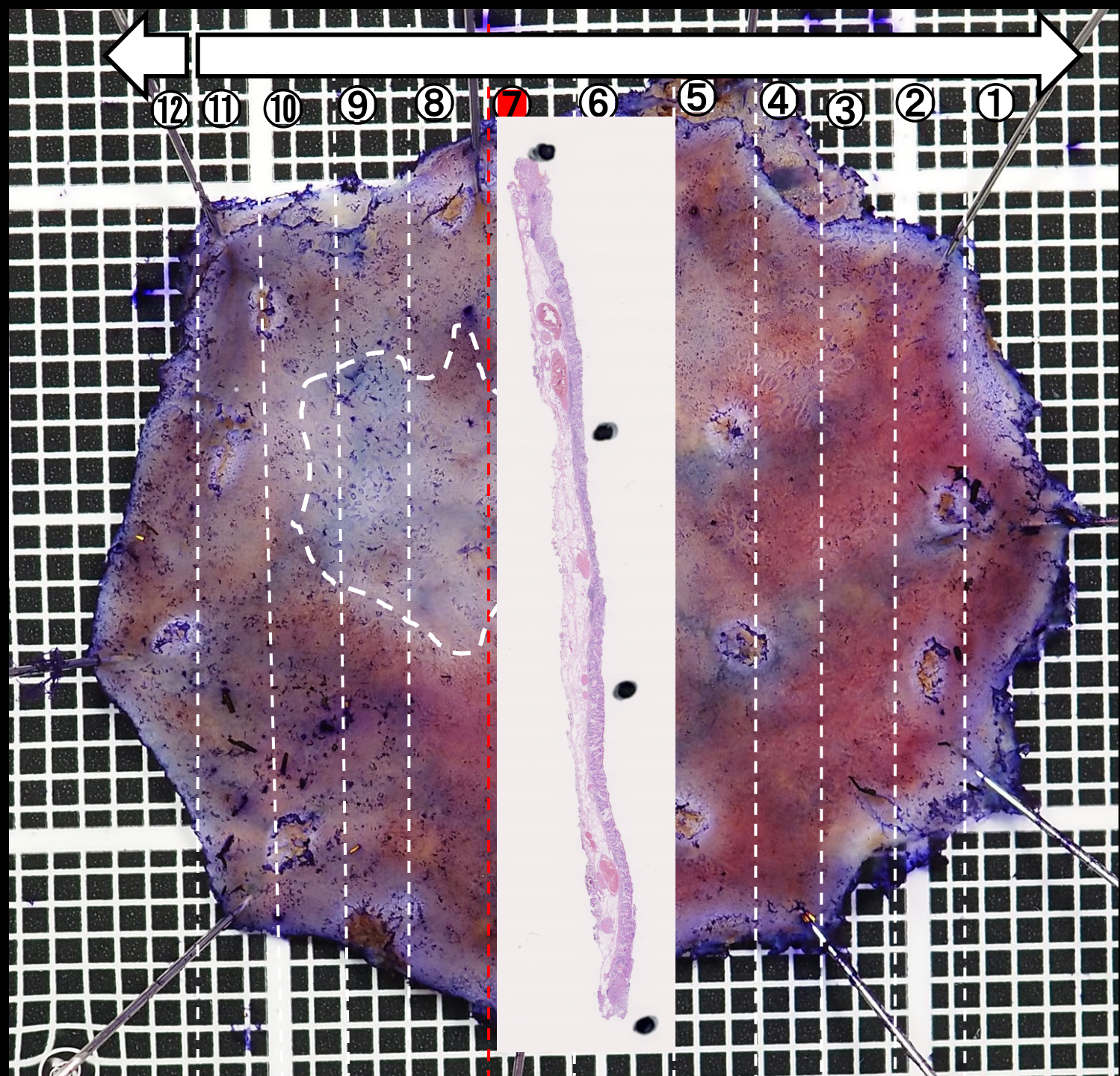
肛門側



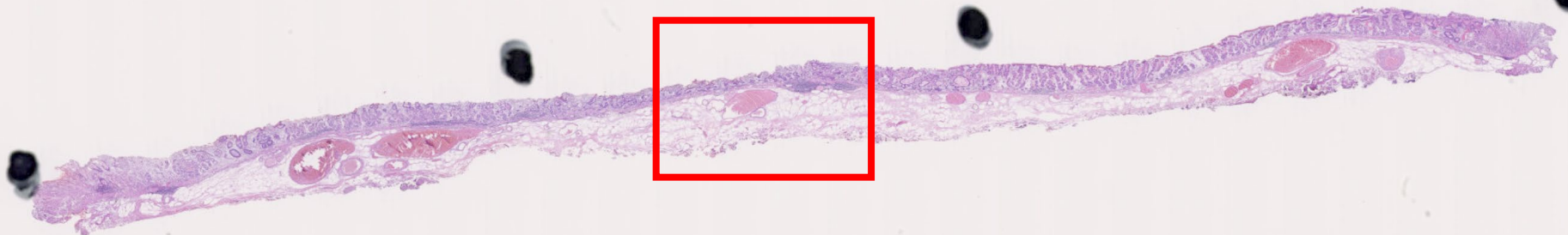
口側

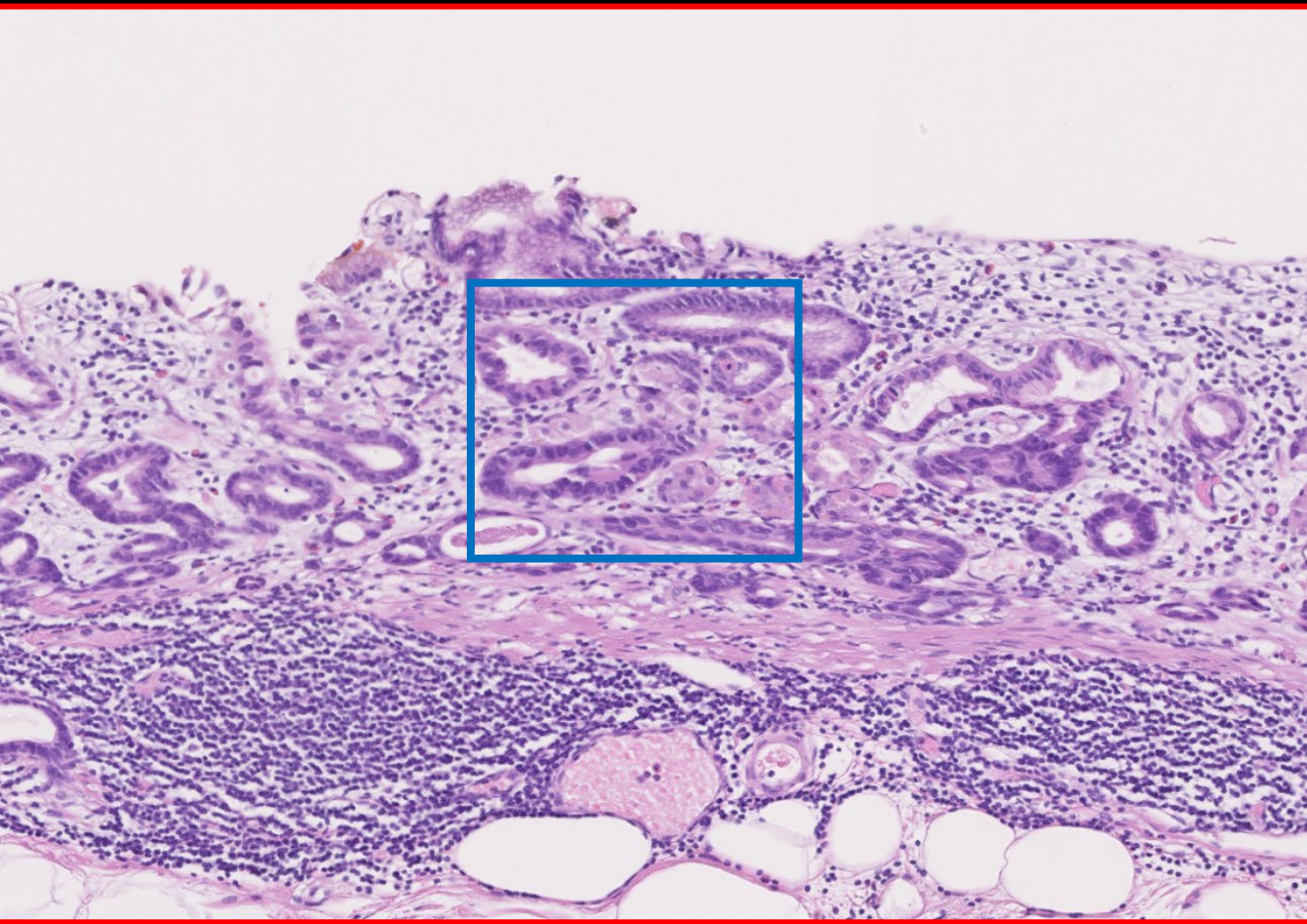
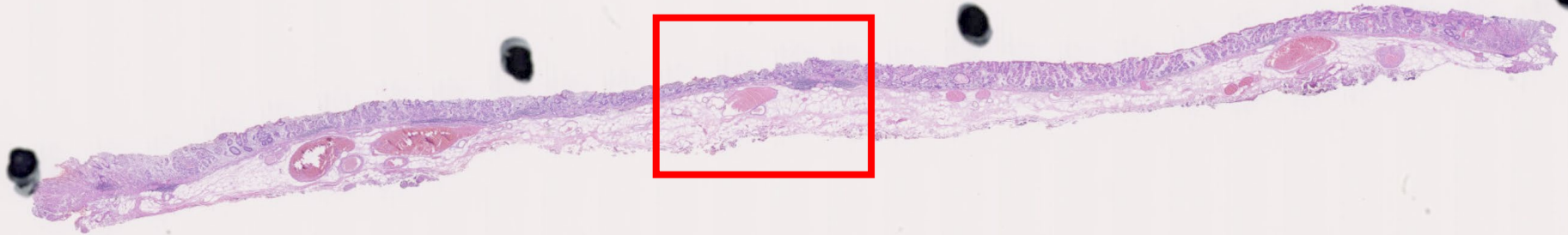


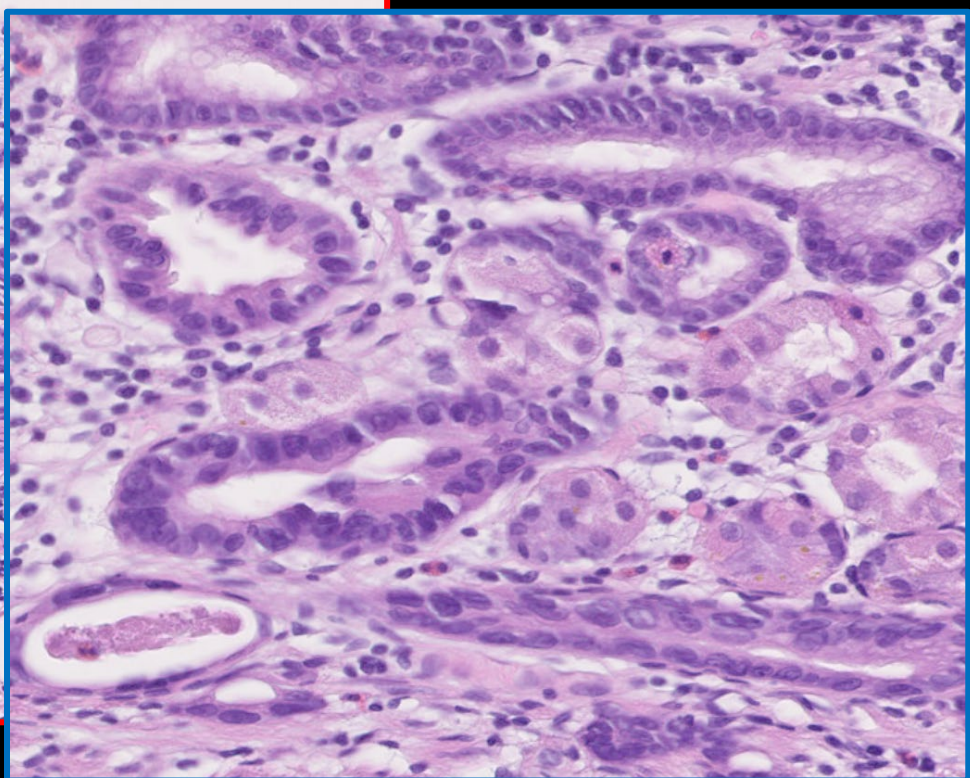
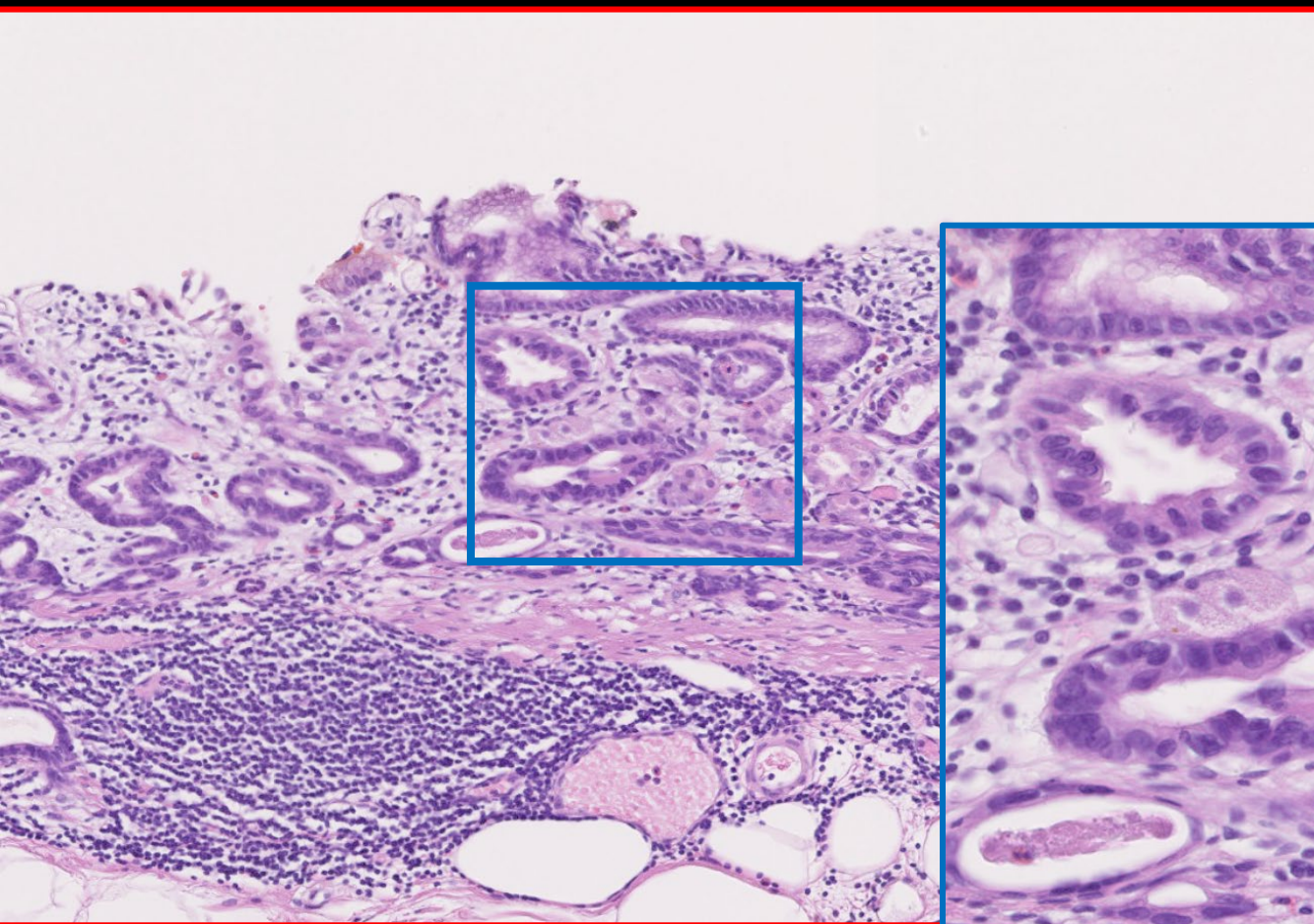
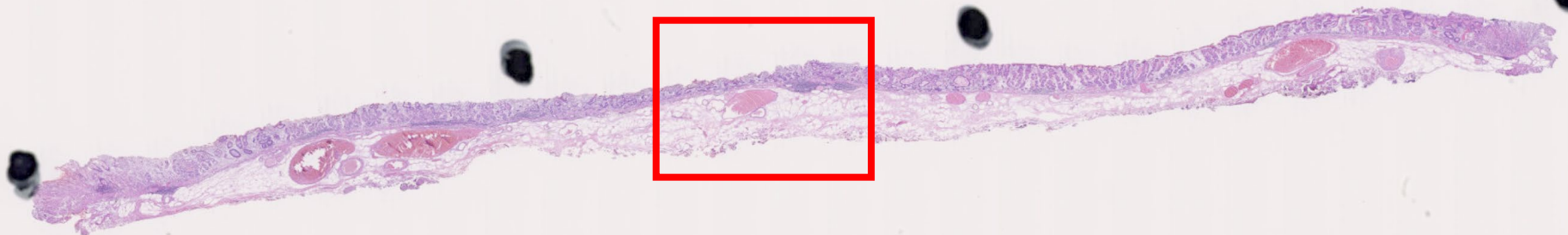
肛門側

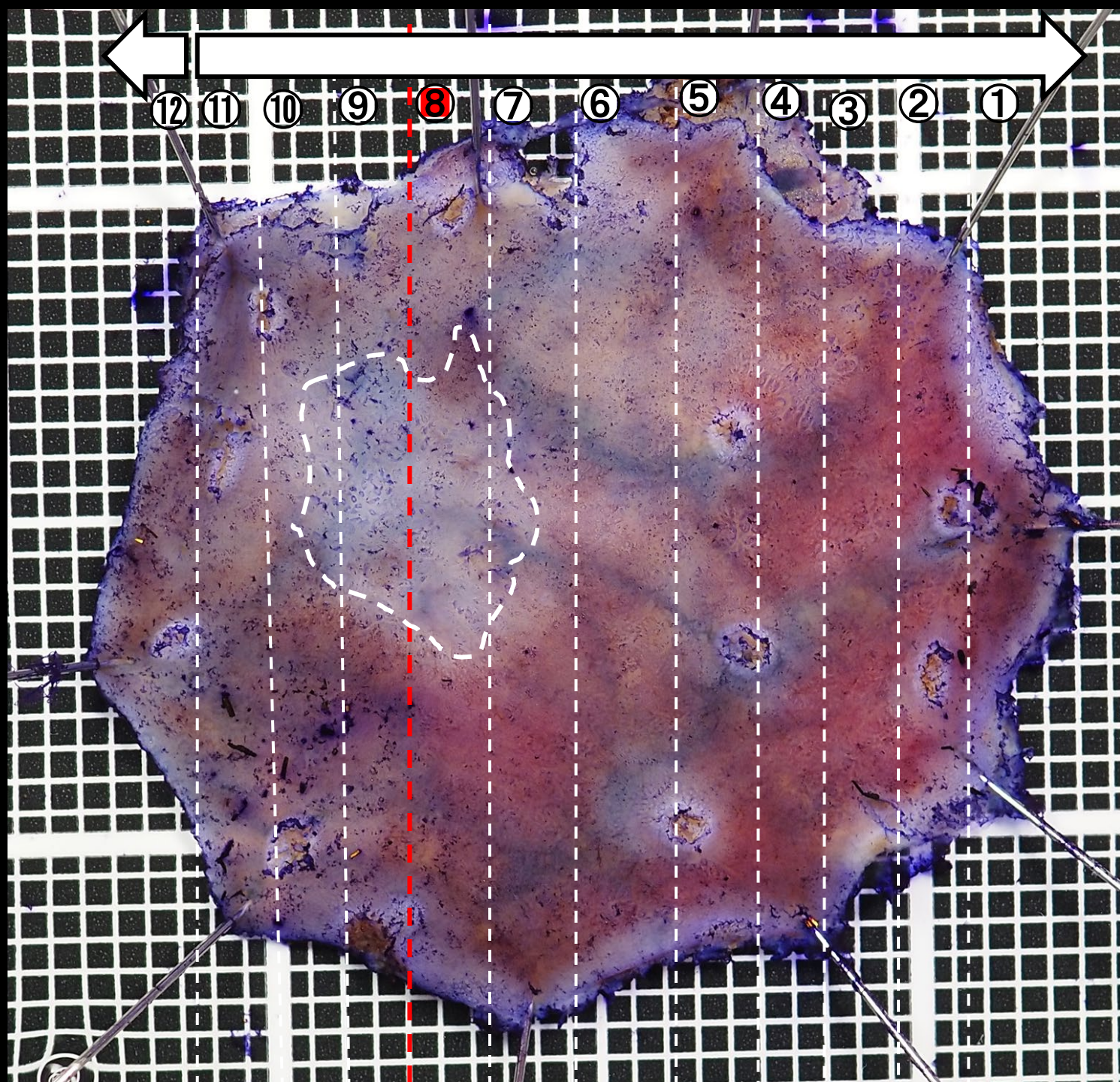


口側









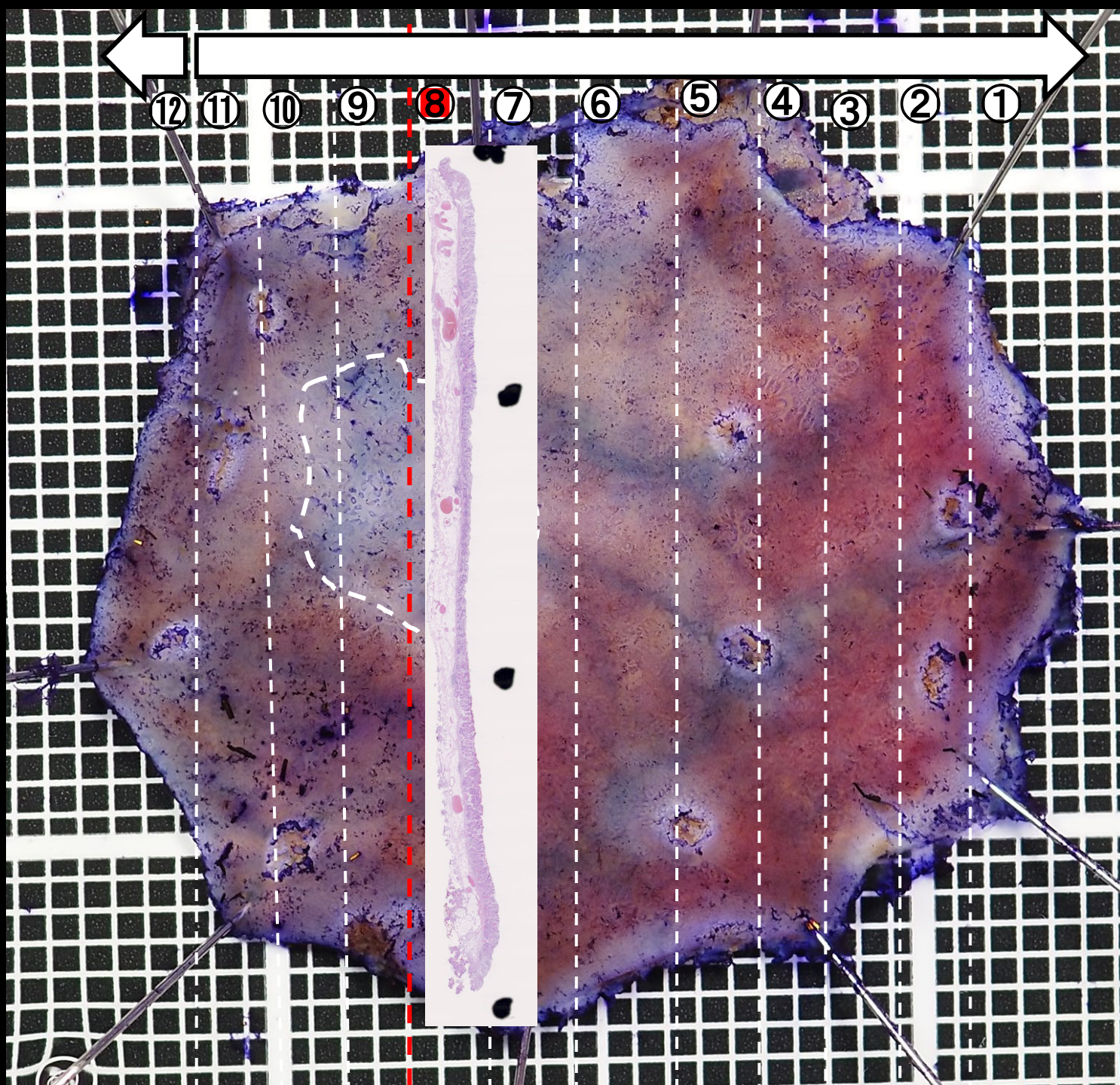
肛門側



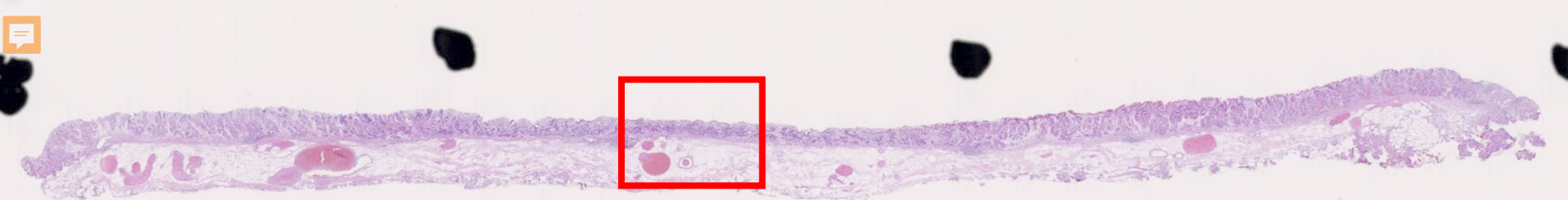
口側

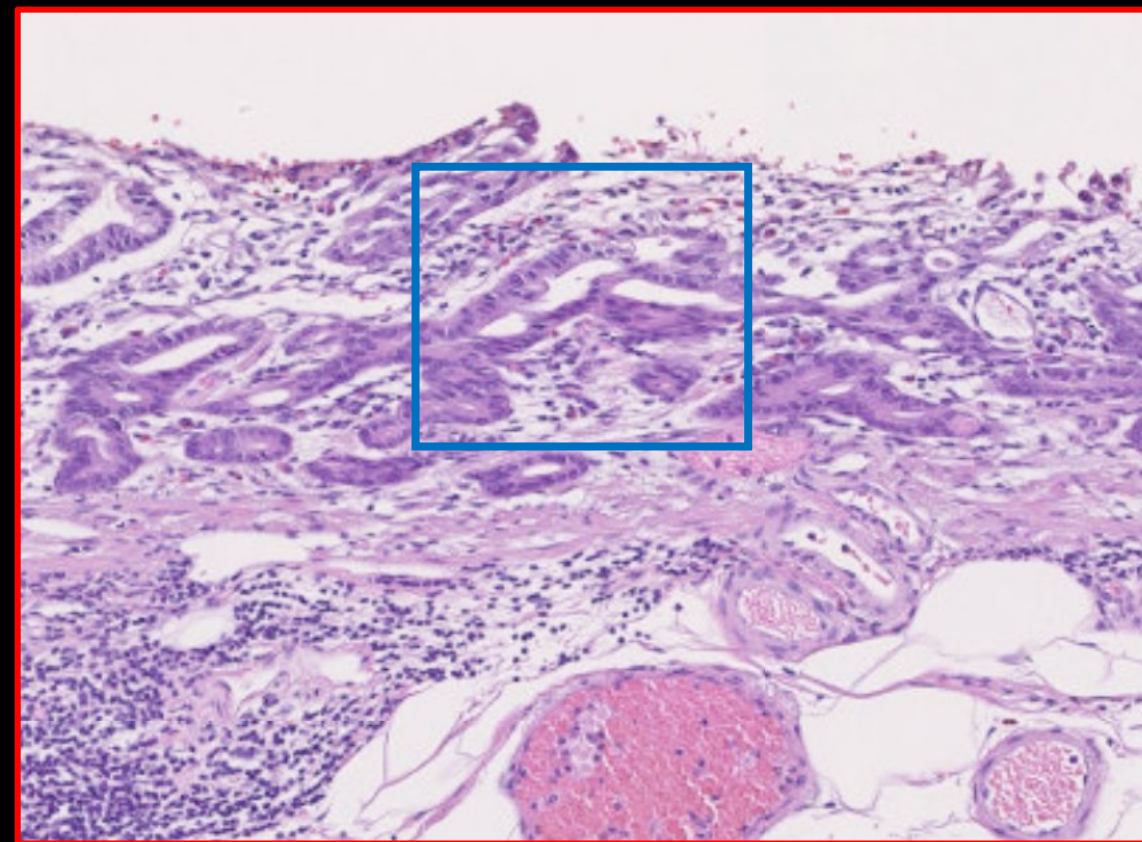
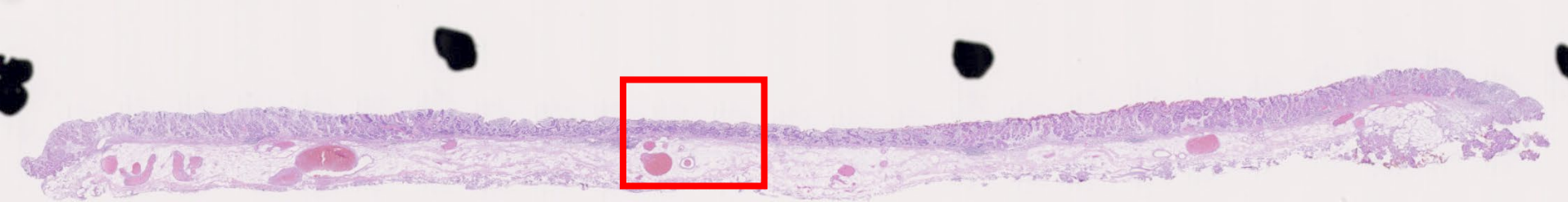


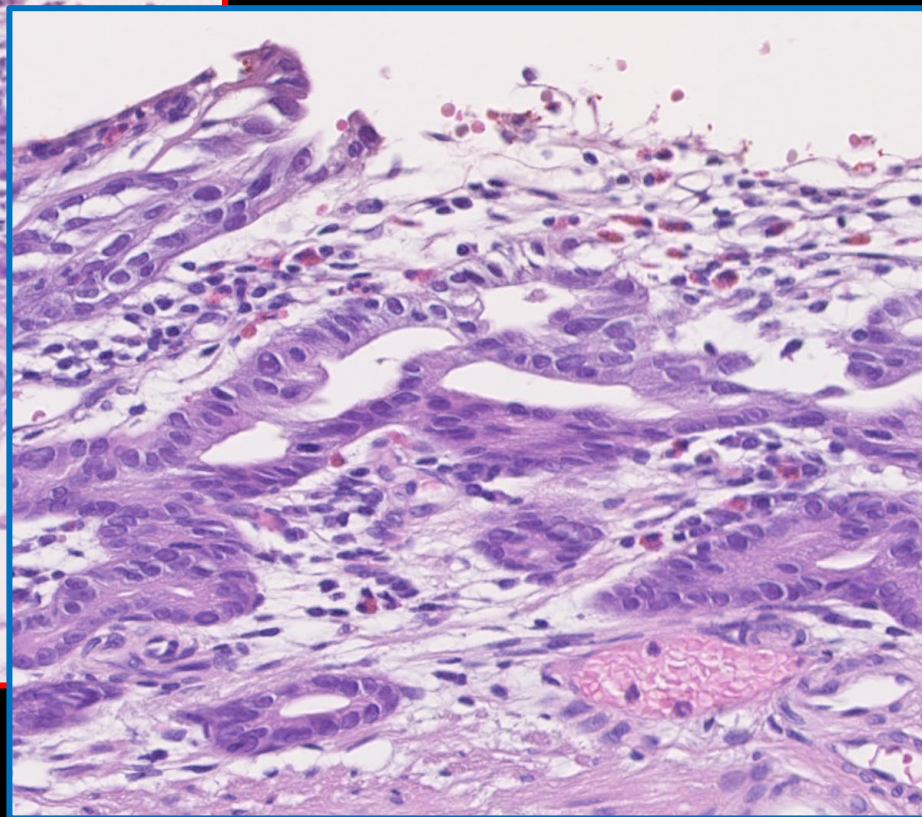
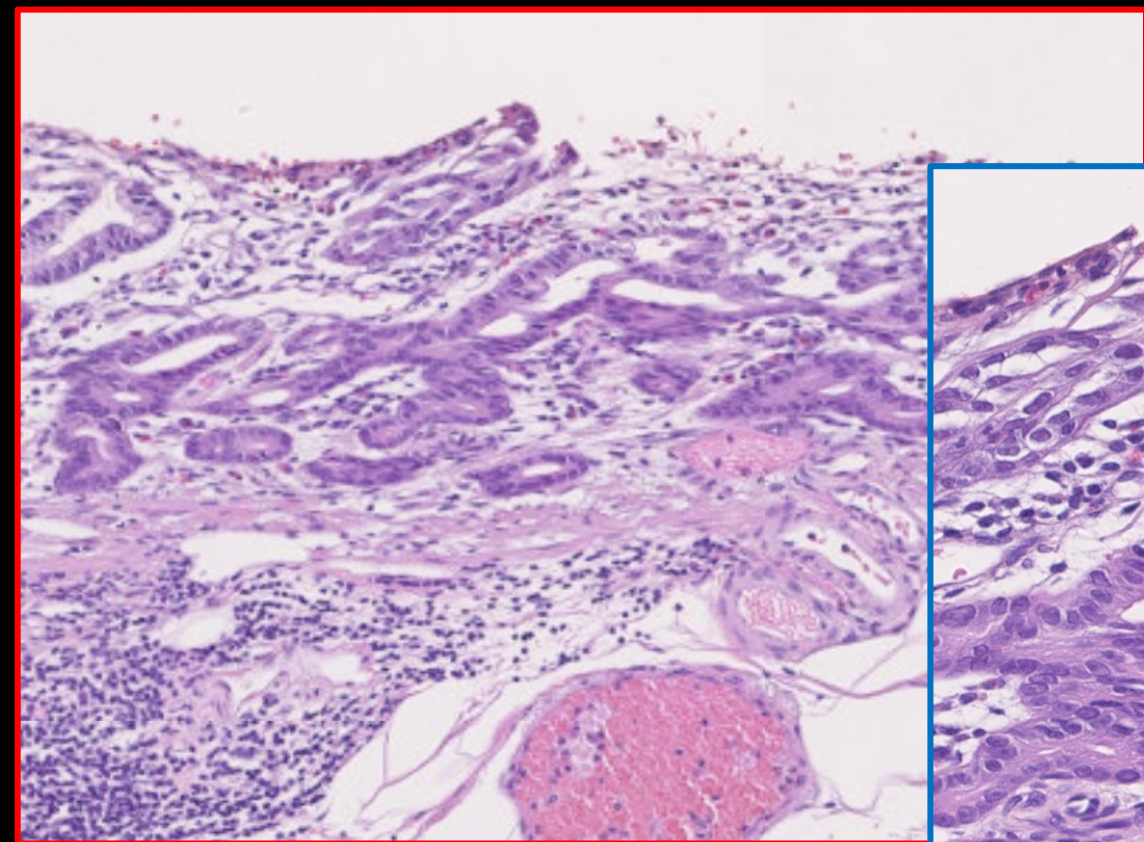
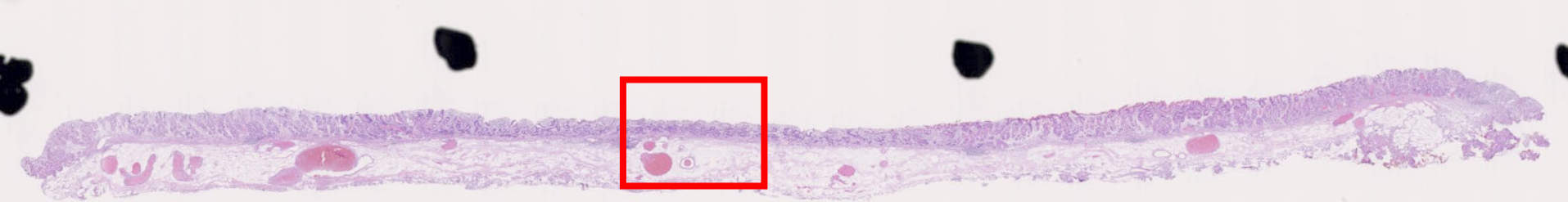
肛門側

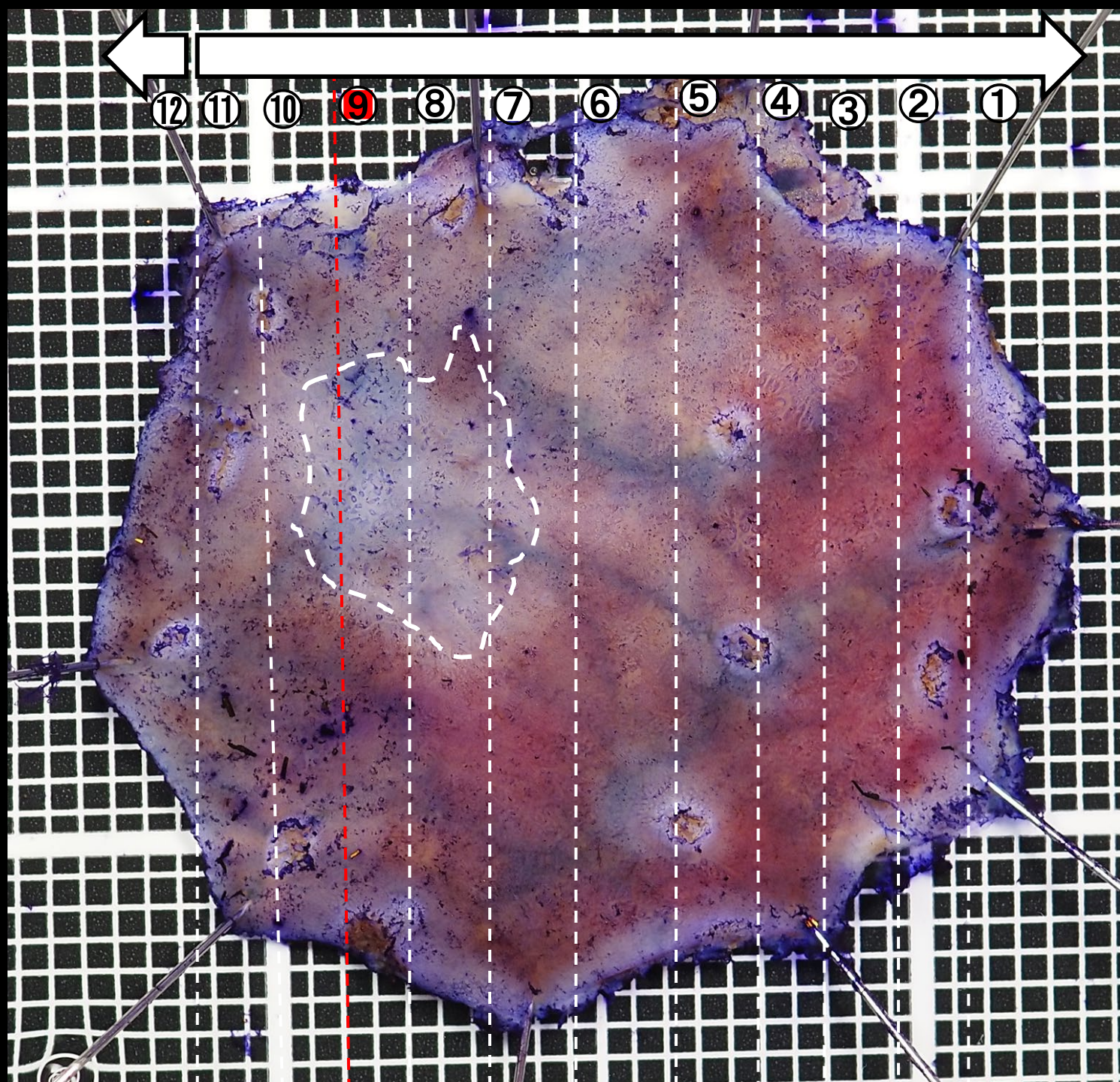


口側







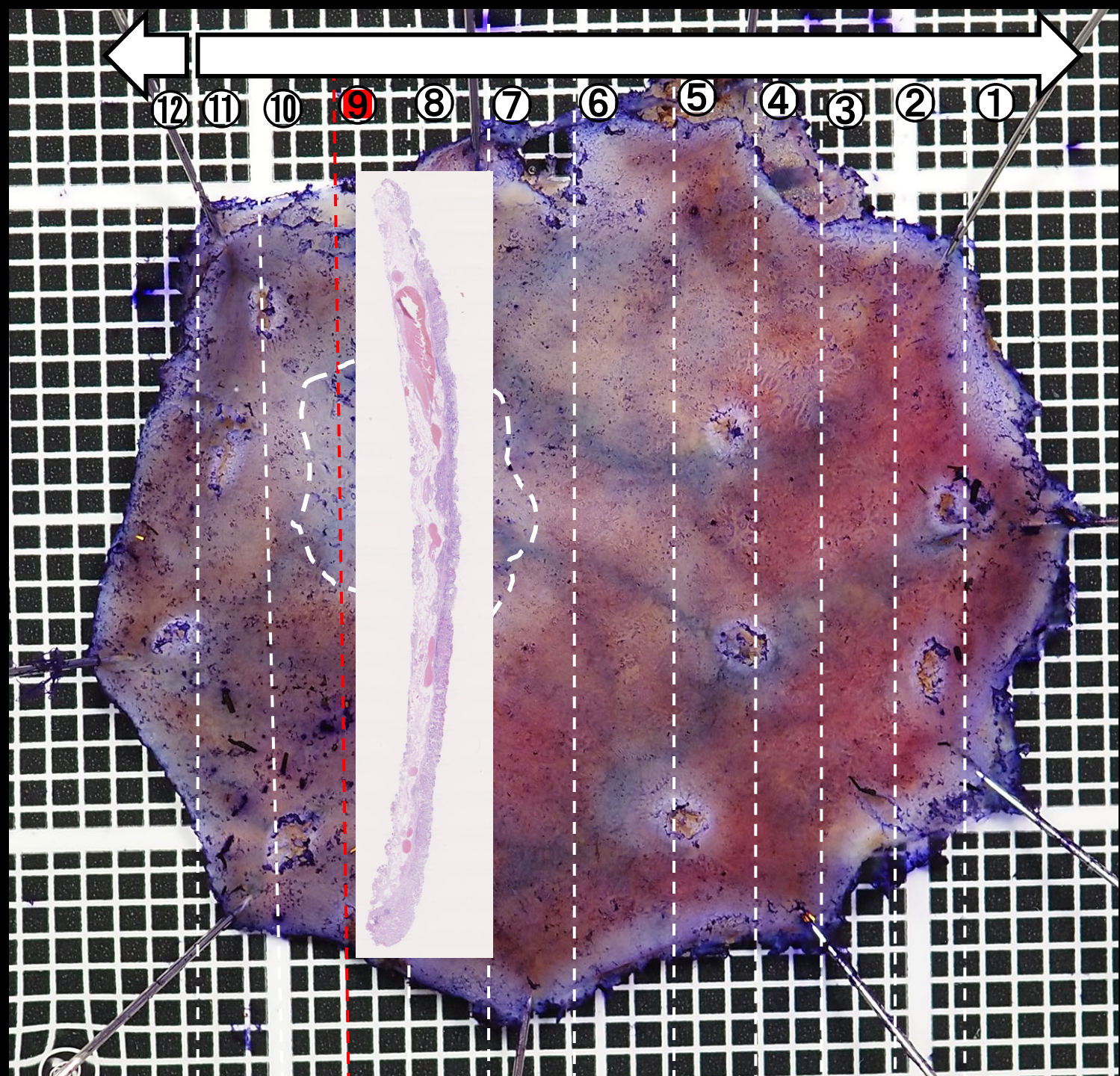


肛門側

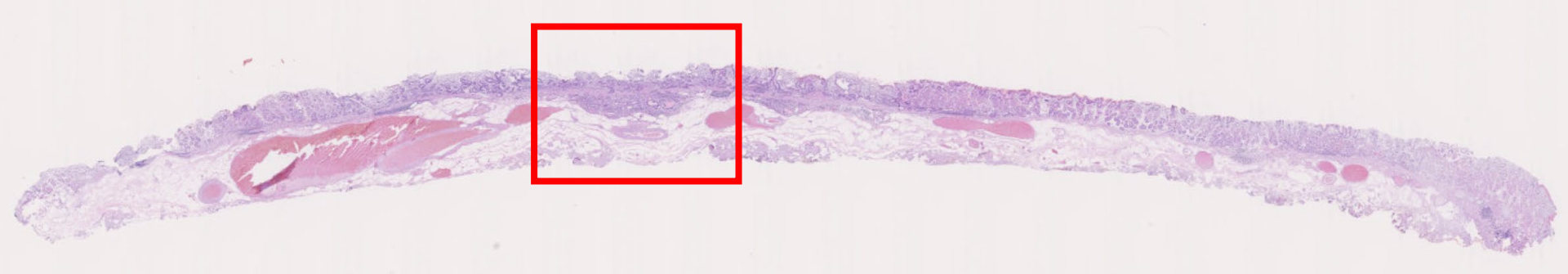
口側

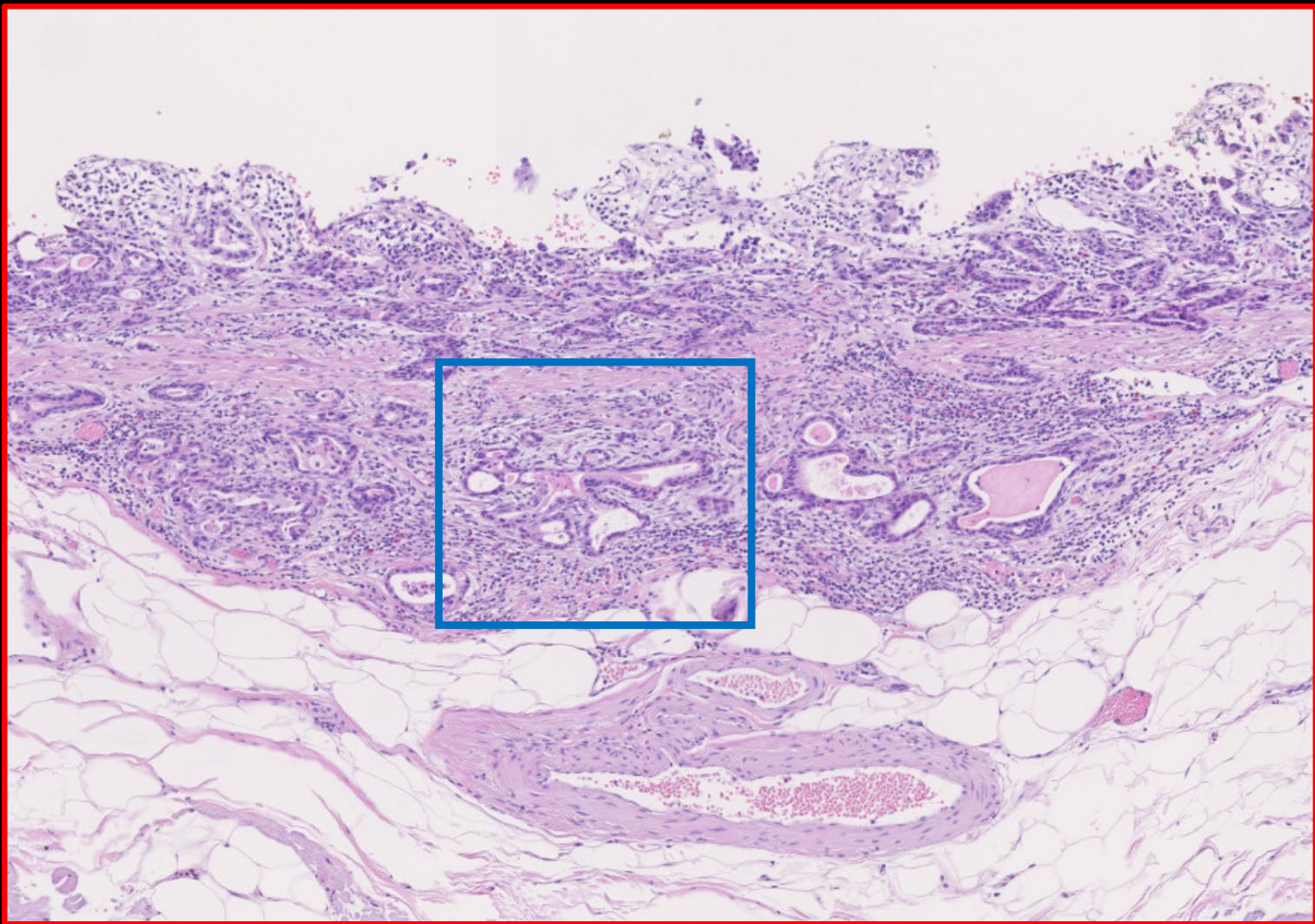
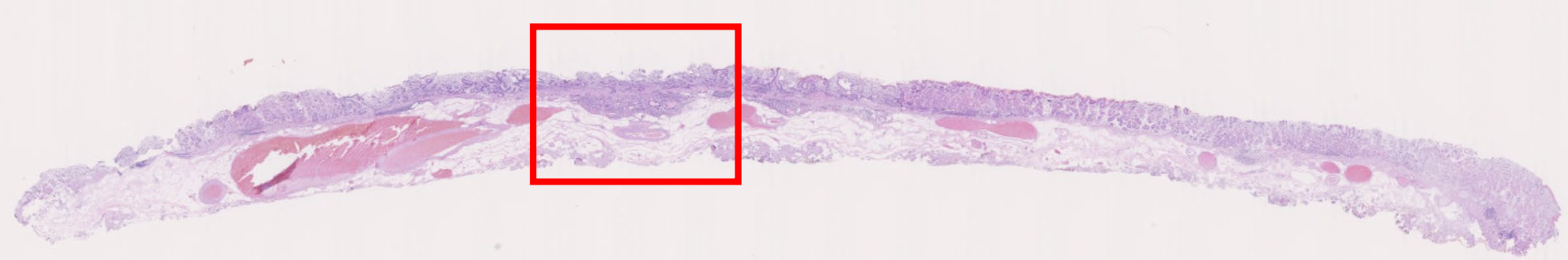


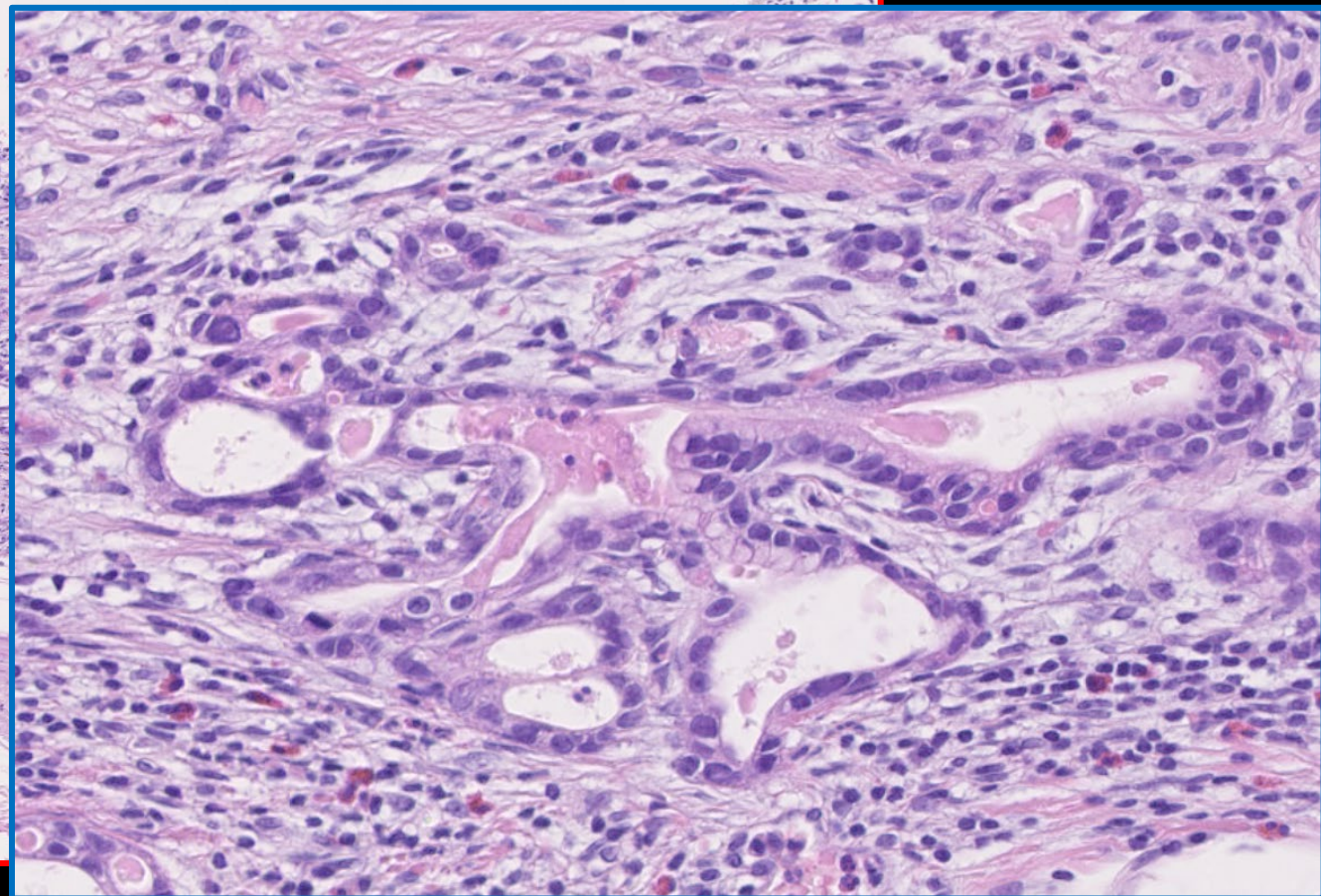
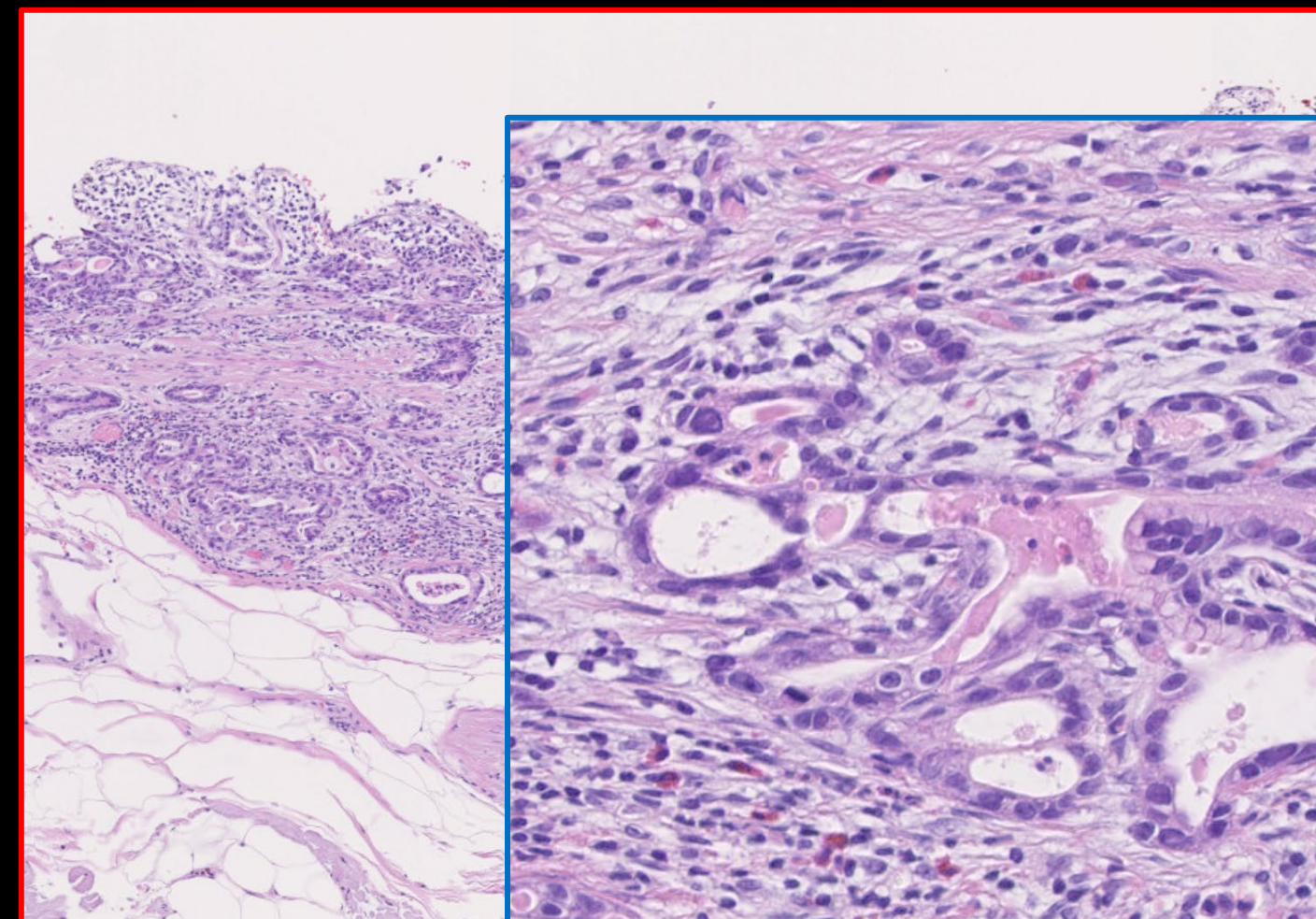
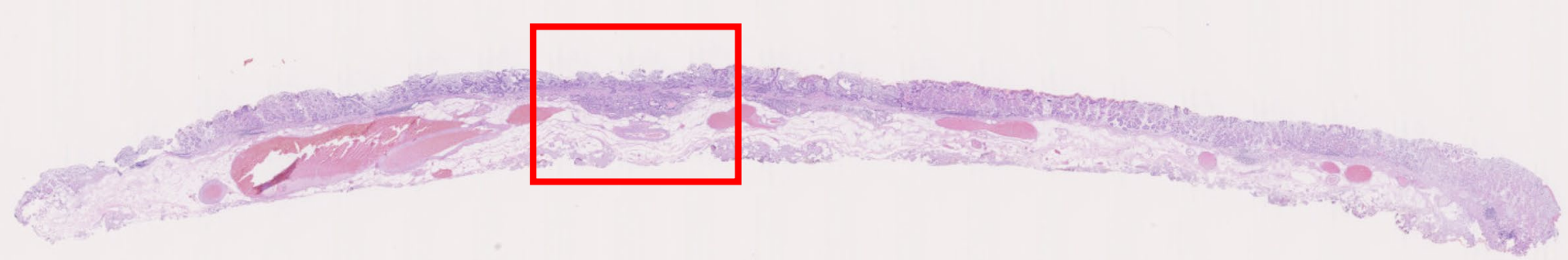
肛門側

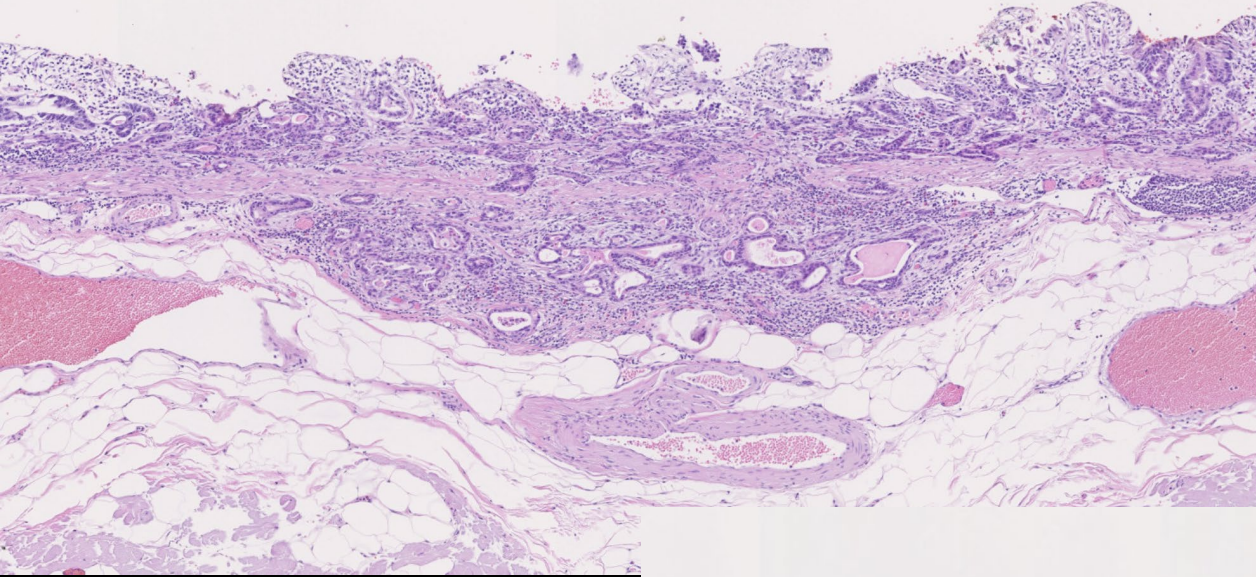


口側

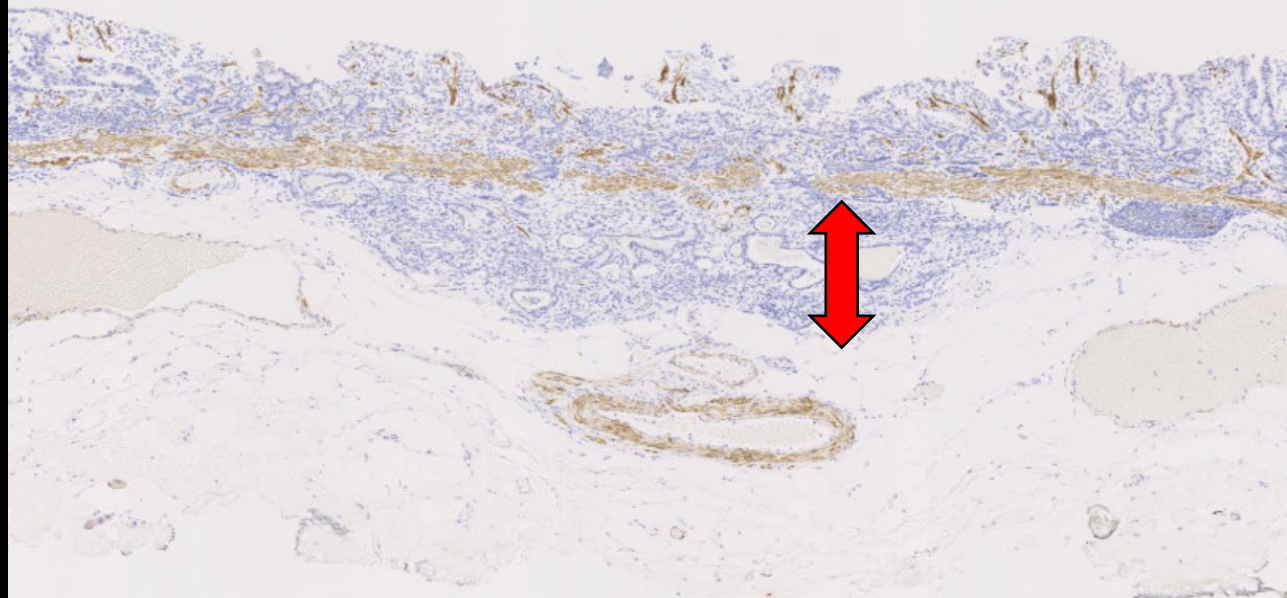


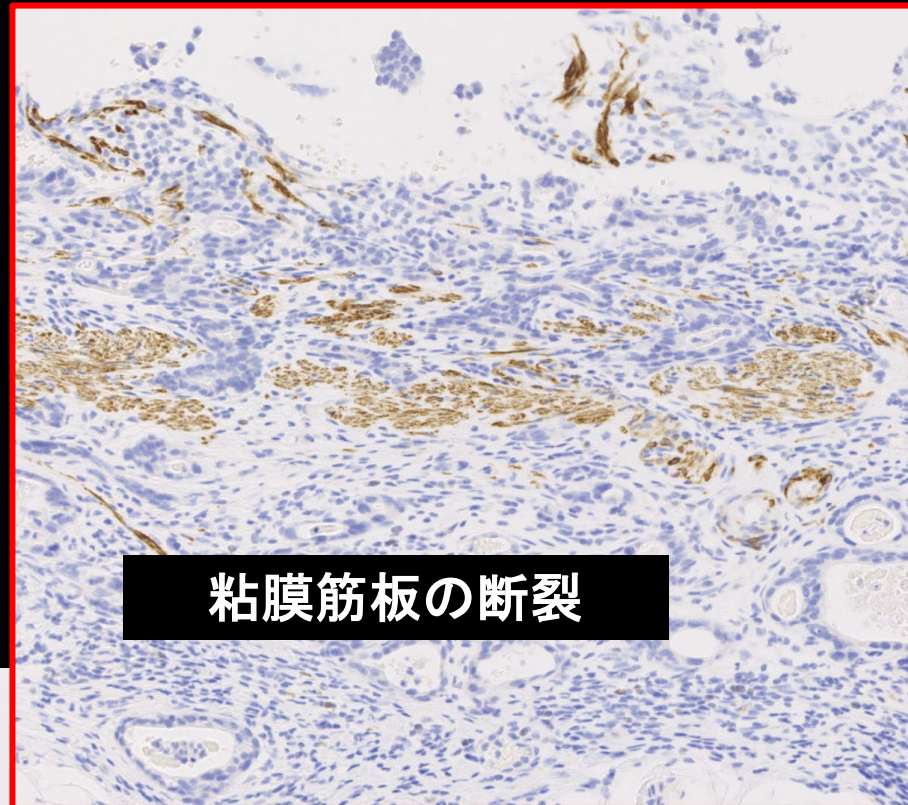
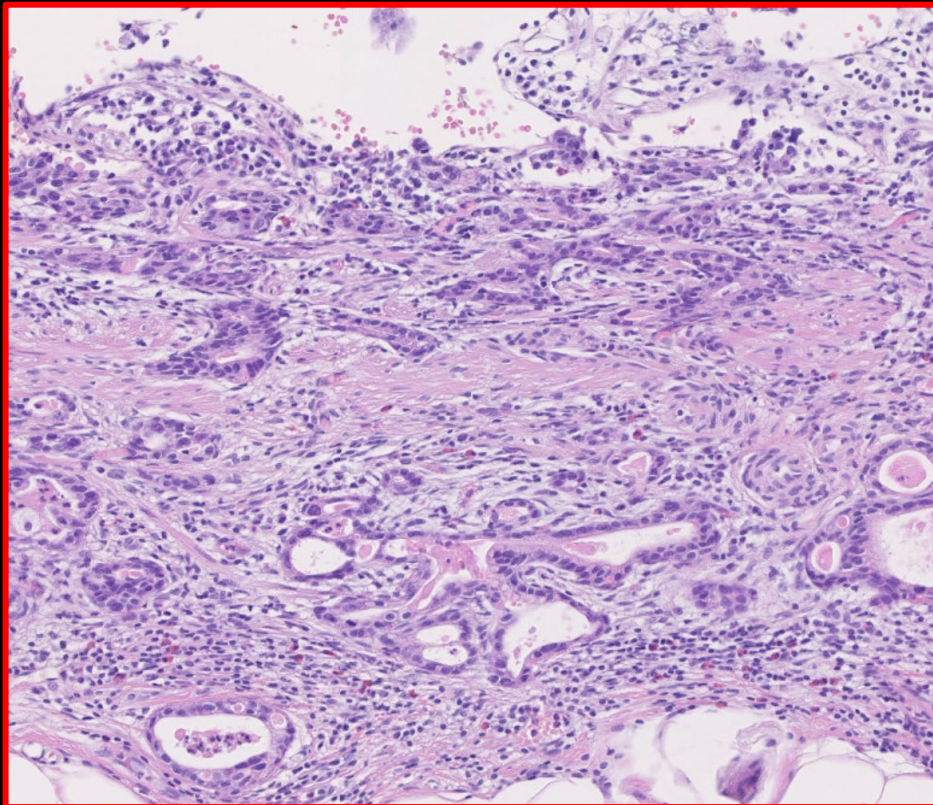




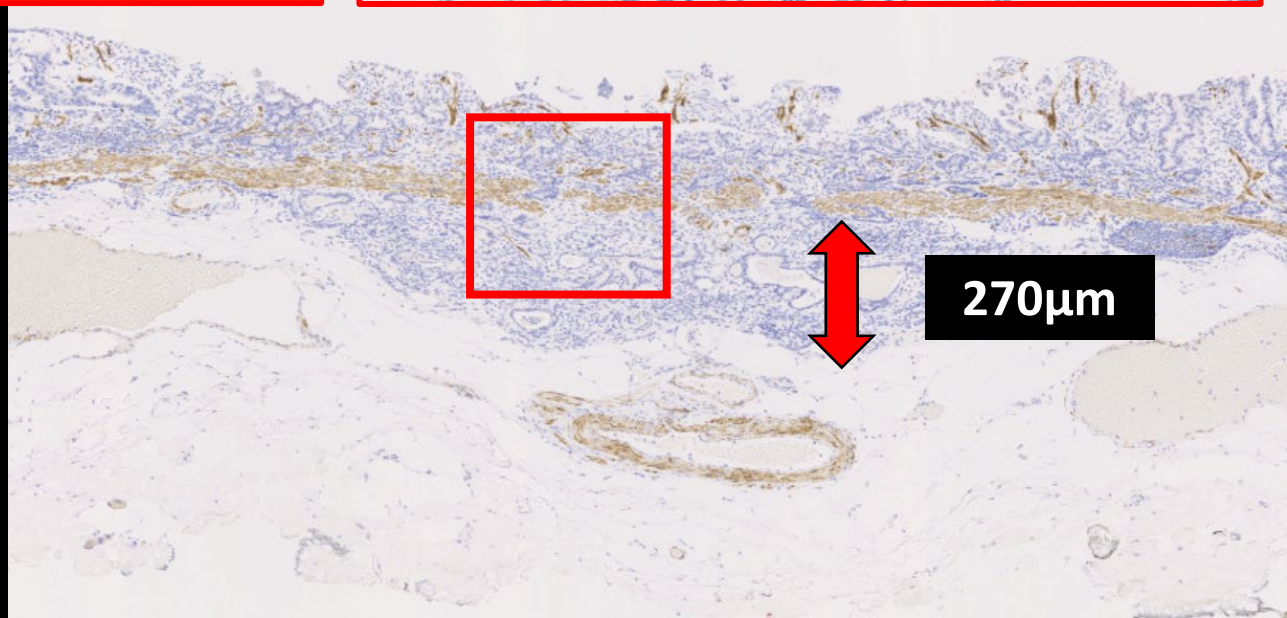


des

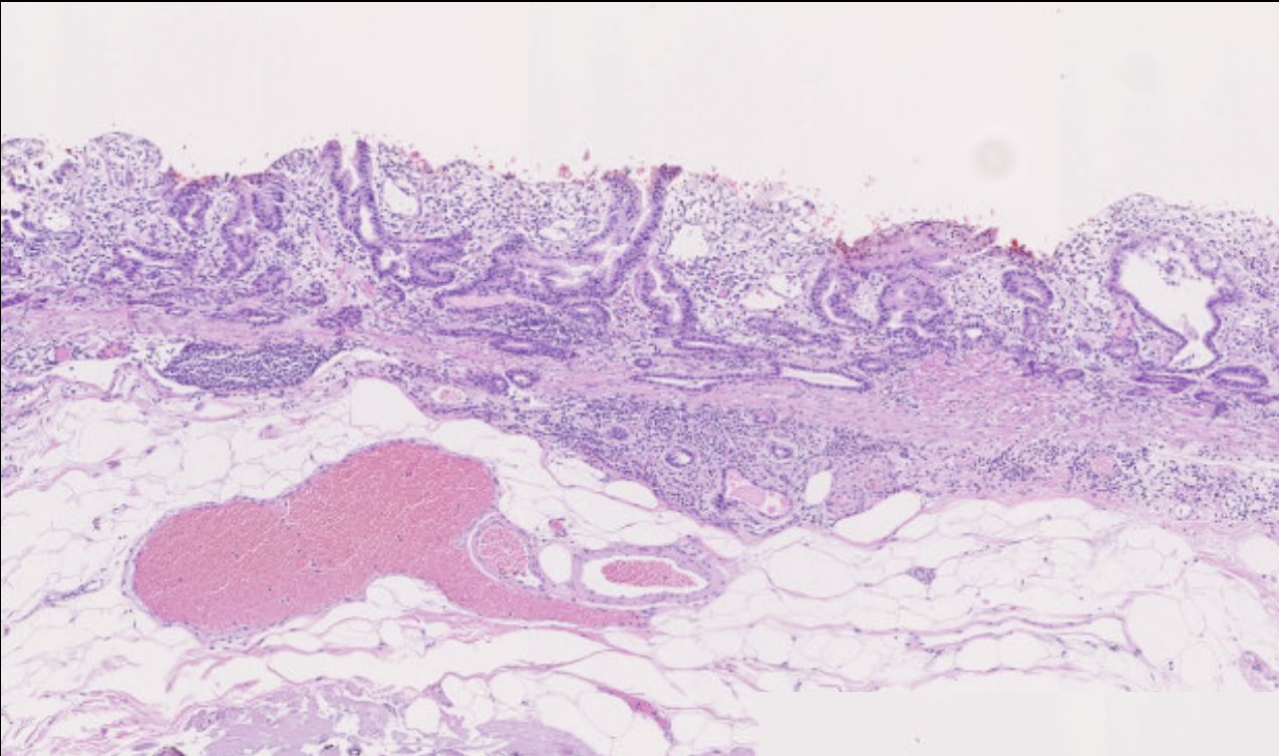




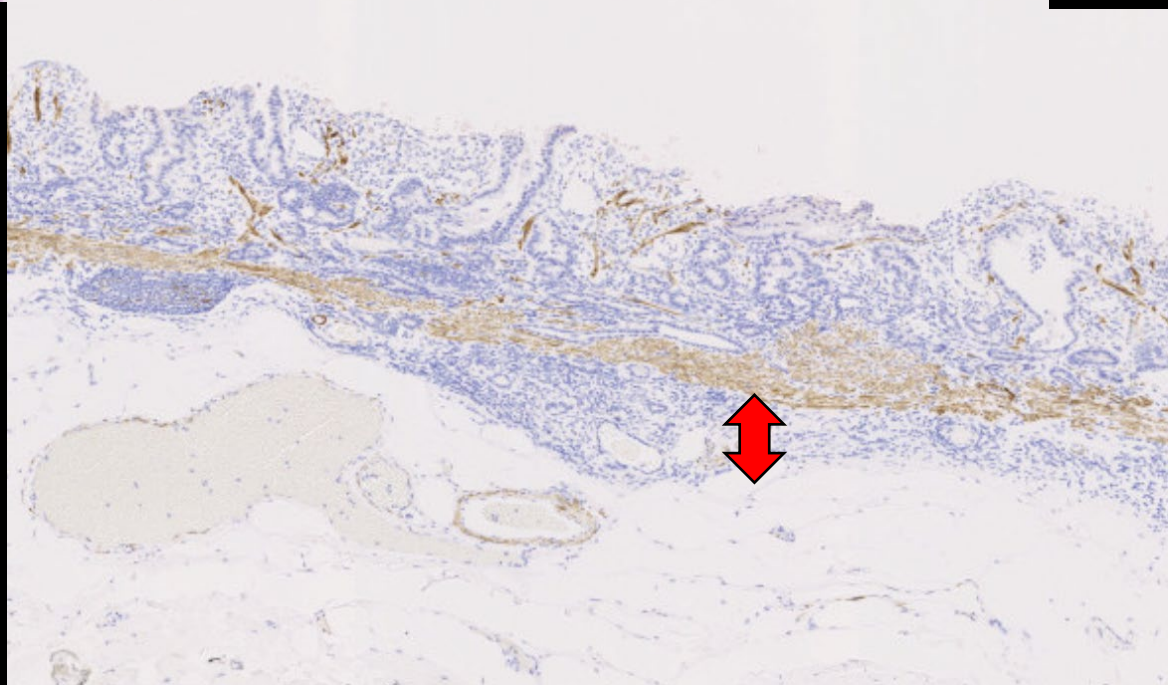
粘膜筋板の断裂

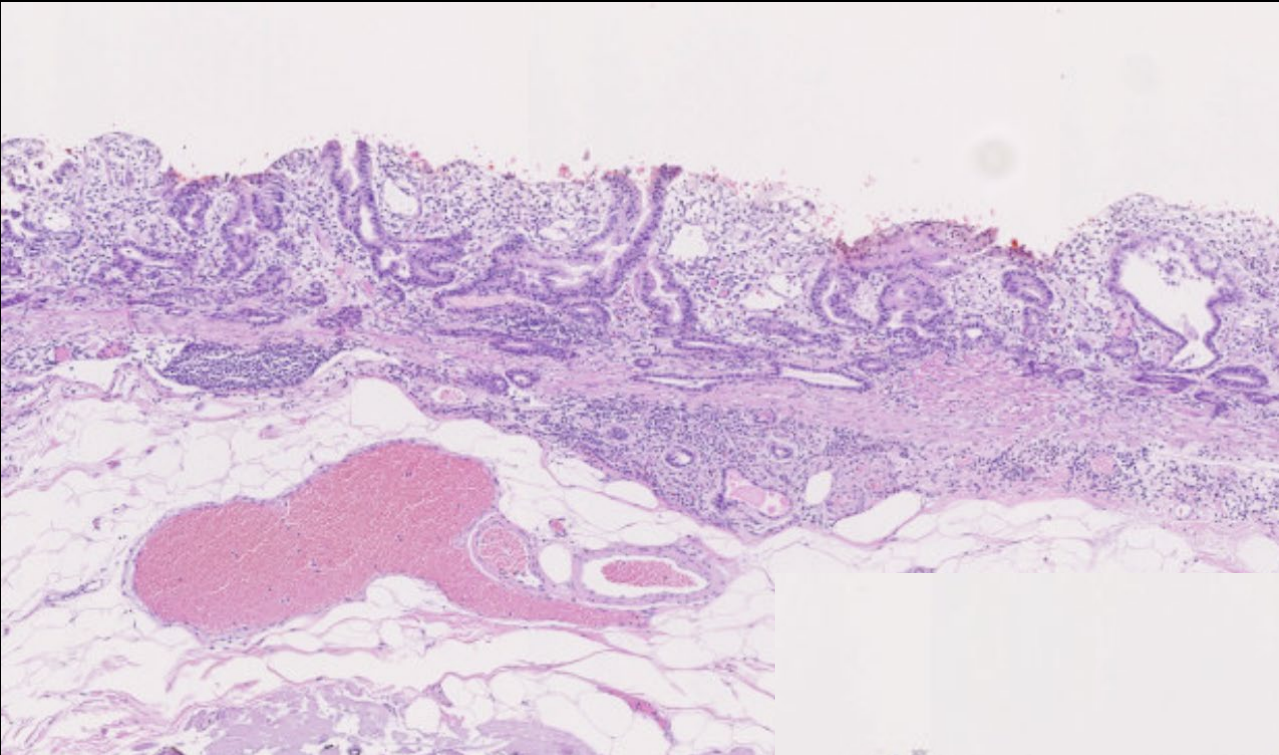


270μm

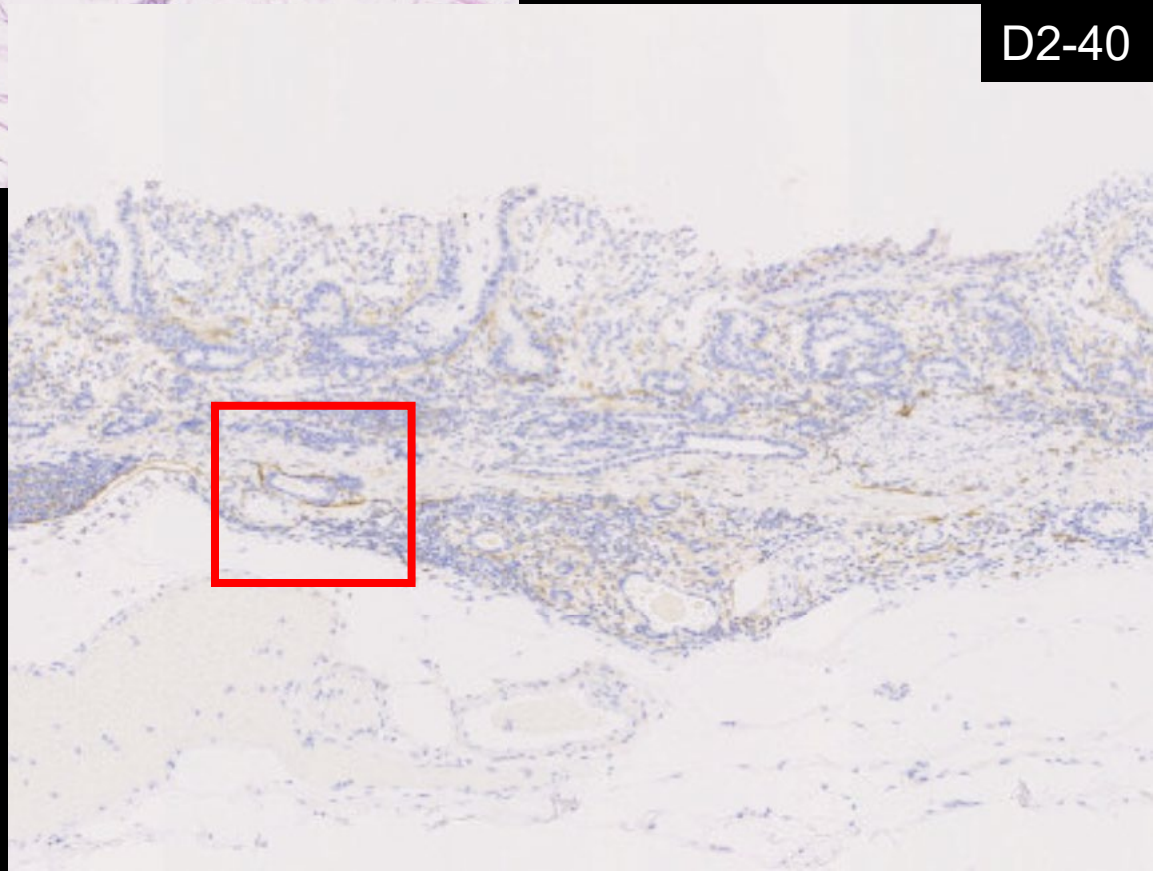


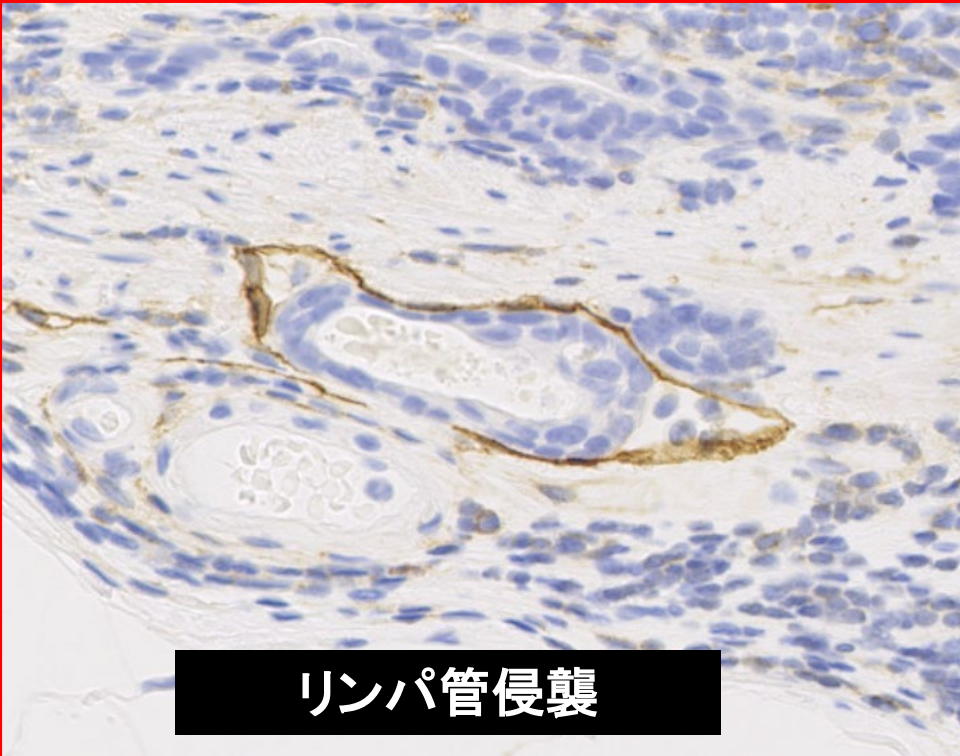
des



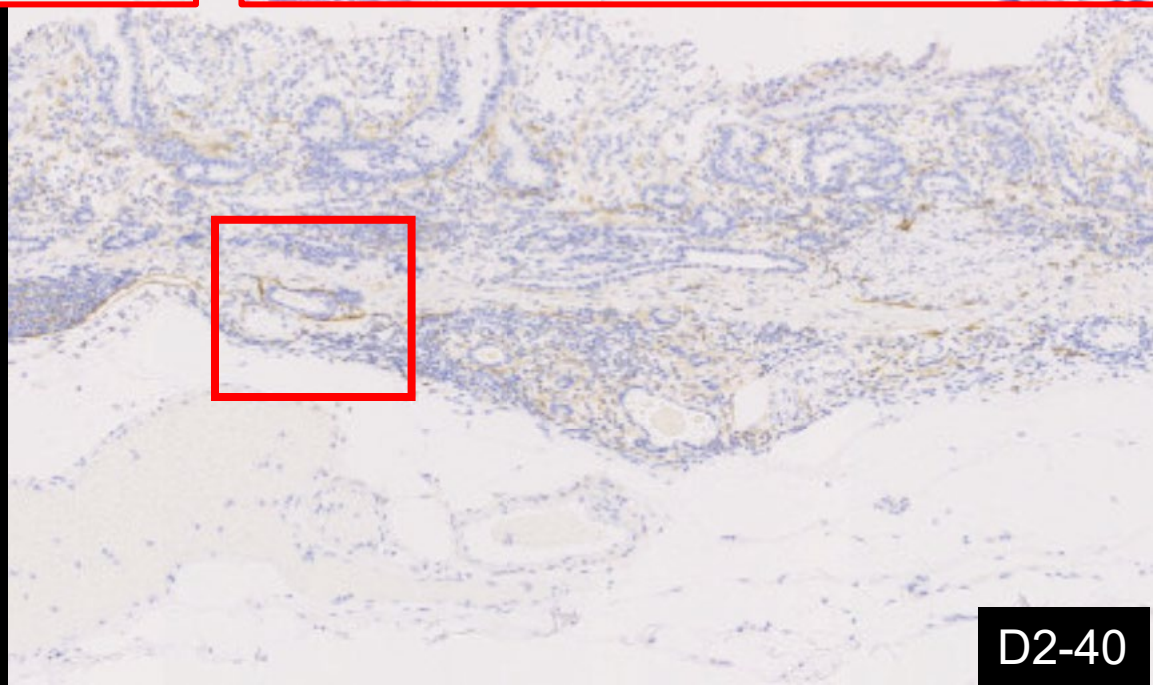
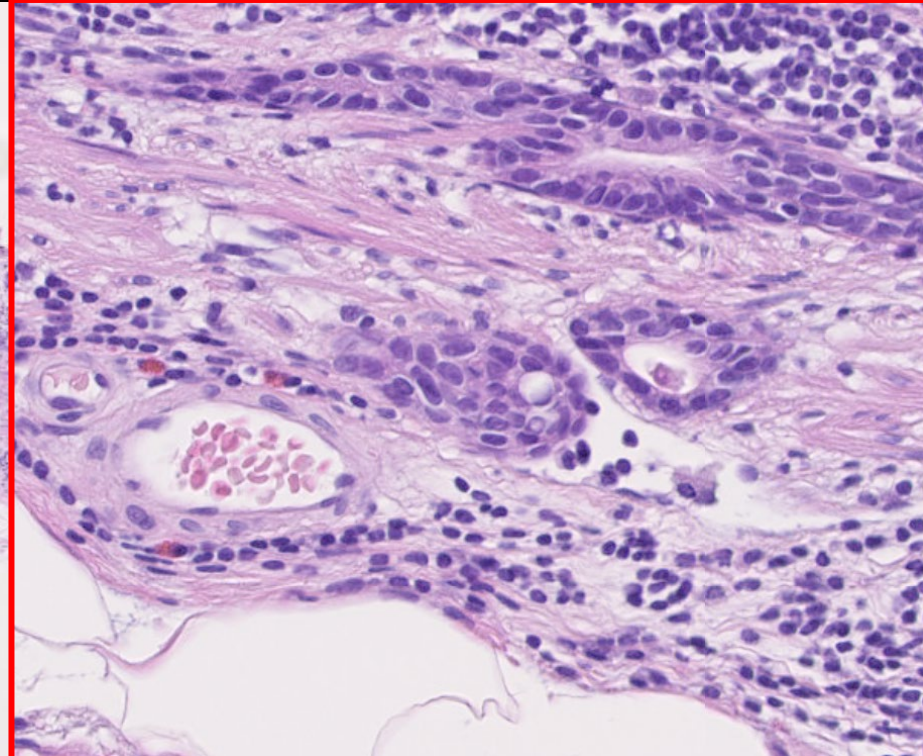


D2-40





リンパ管侵襲



病理診断

tubular adenocarcinoma,
well differentiated(tub1>tub2),
pT1b1(SM1, 270μm), INFb, Ly1a(D2-40), V0(EVG),
pUL0, pHM0(6000μm), pVM0(500μm)

e-Cura C2

→ロボット補助下腹腔鏡下幽門側胃切除術

Stomach, distal gastrectomy:

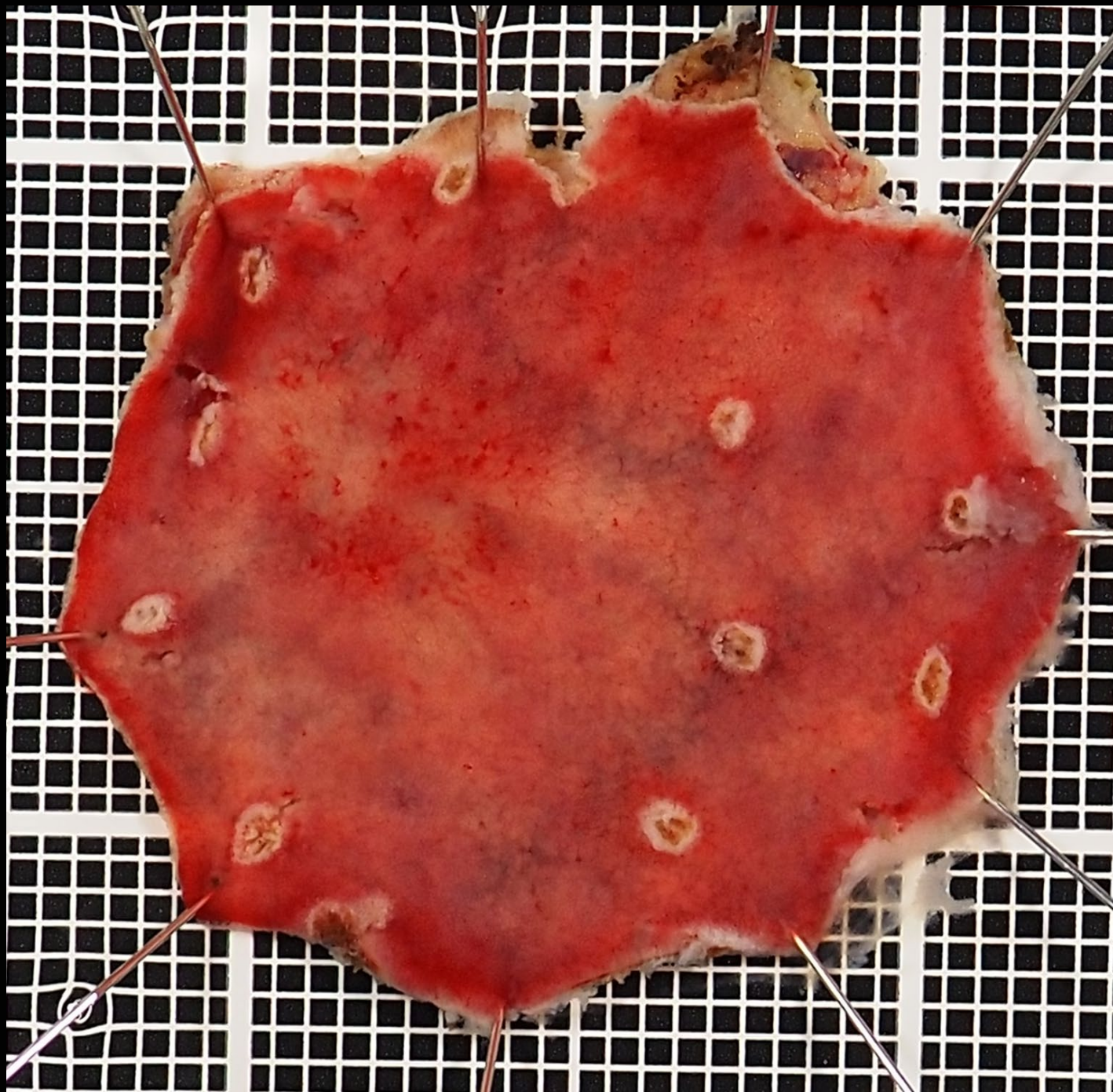
no residual carcinoma (status post ESD).

Lymph node, dissection: no evidence of malignancy.

Mapping

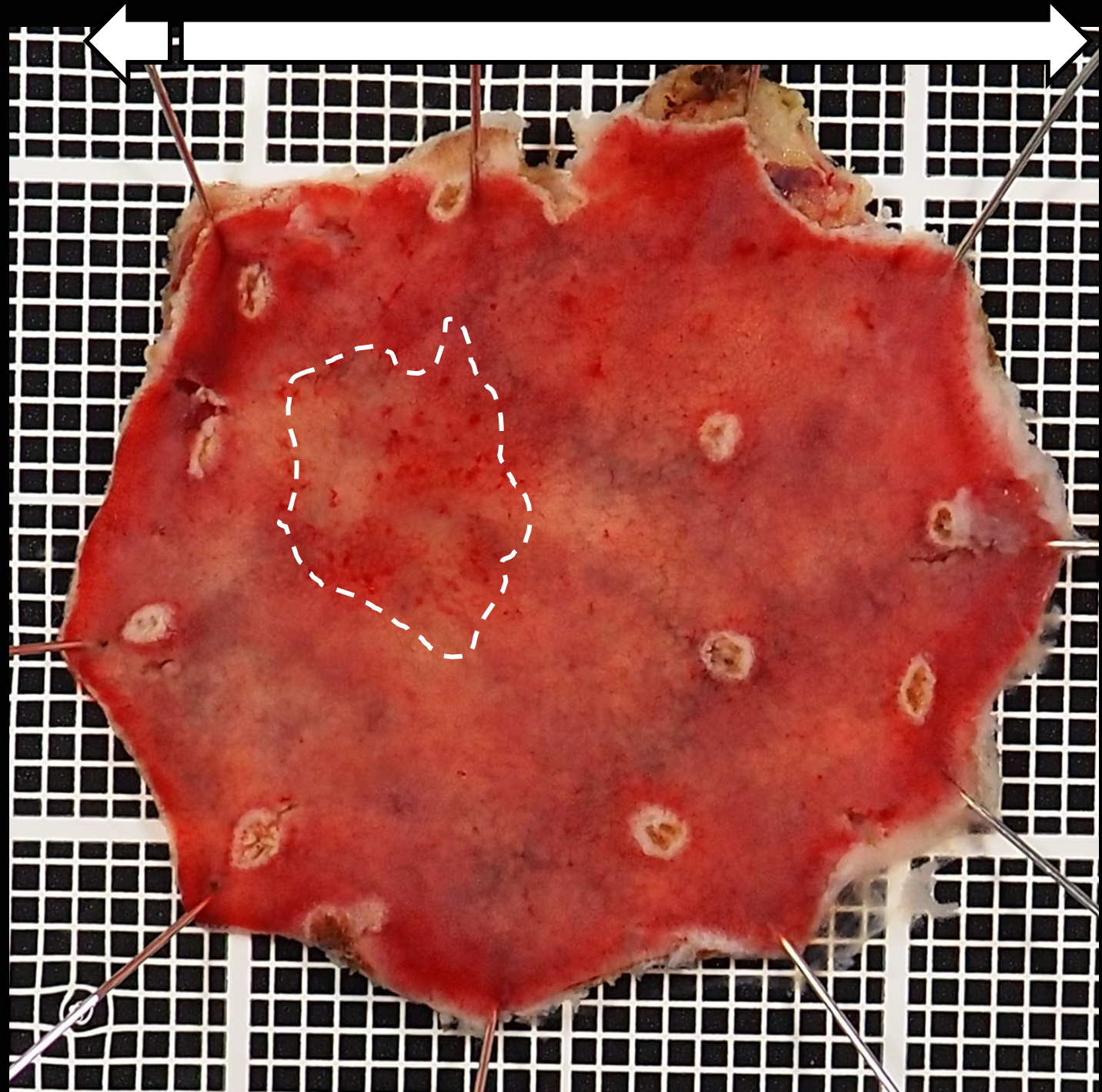


肛門側



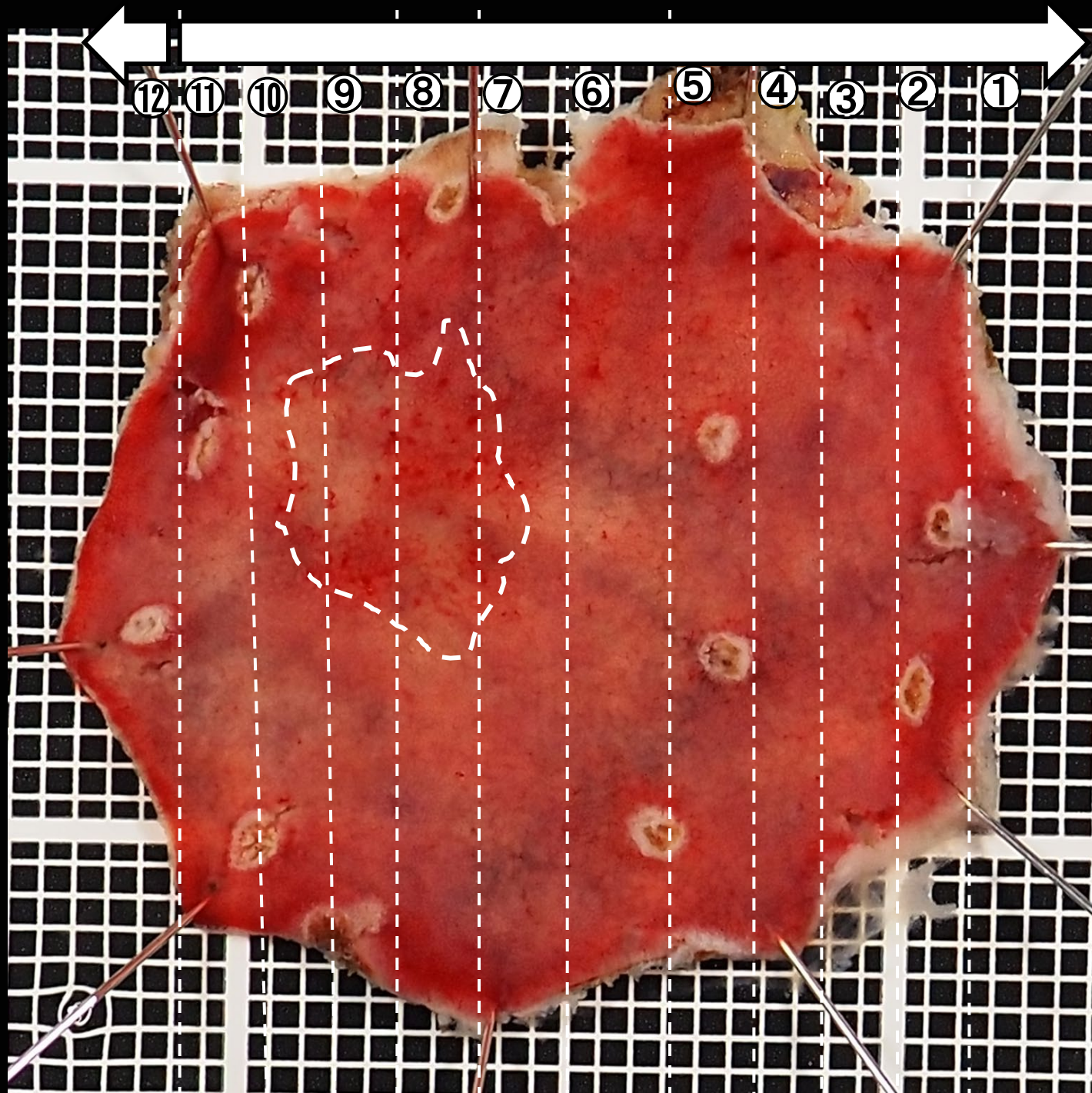
口側

←
肛門側



→
口側

←
肛門側

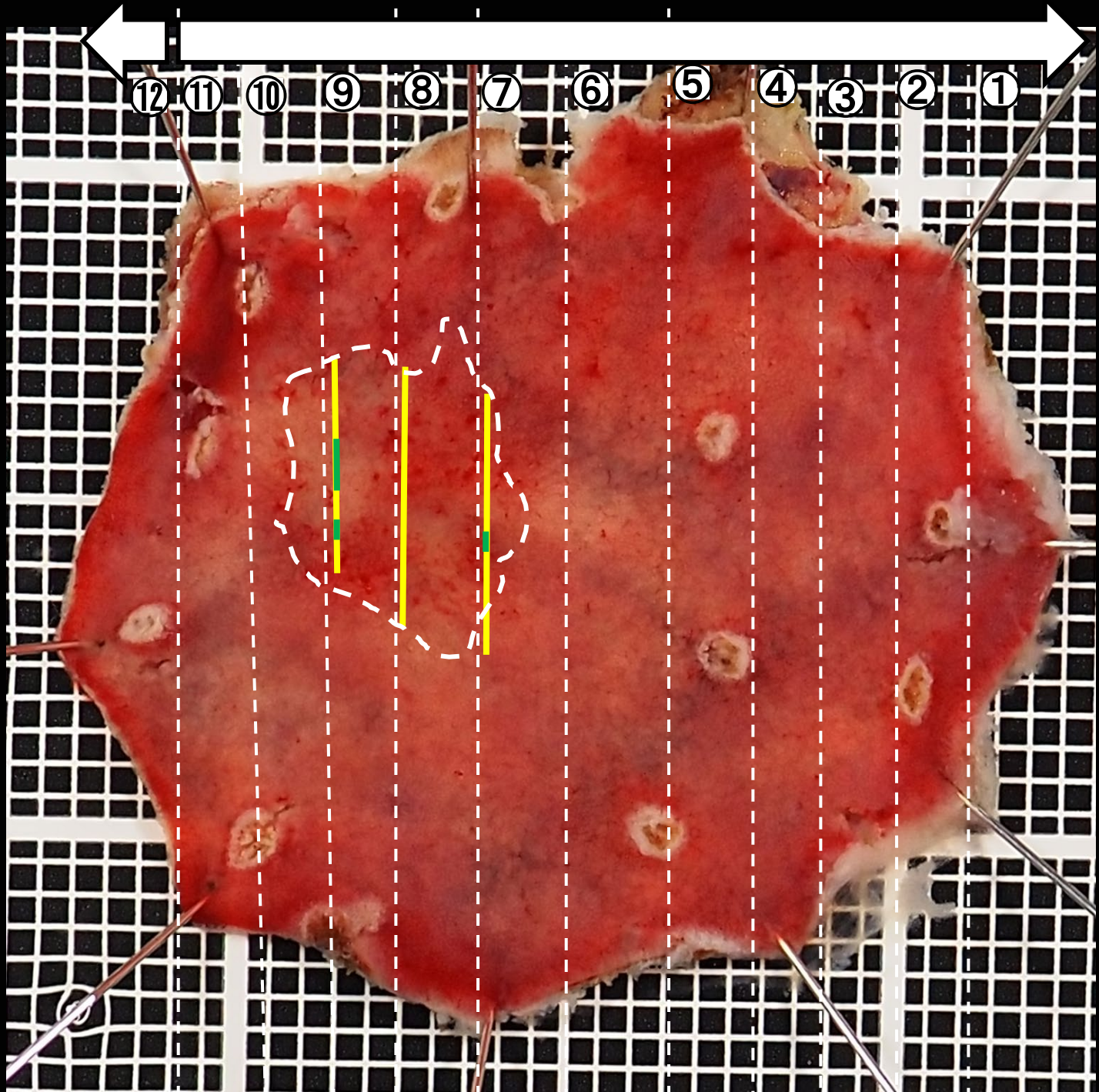


→
口側

←
肛門側

→
口側

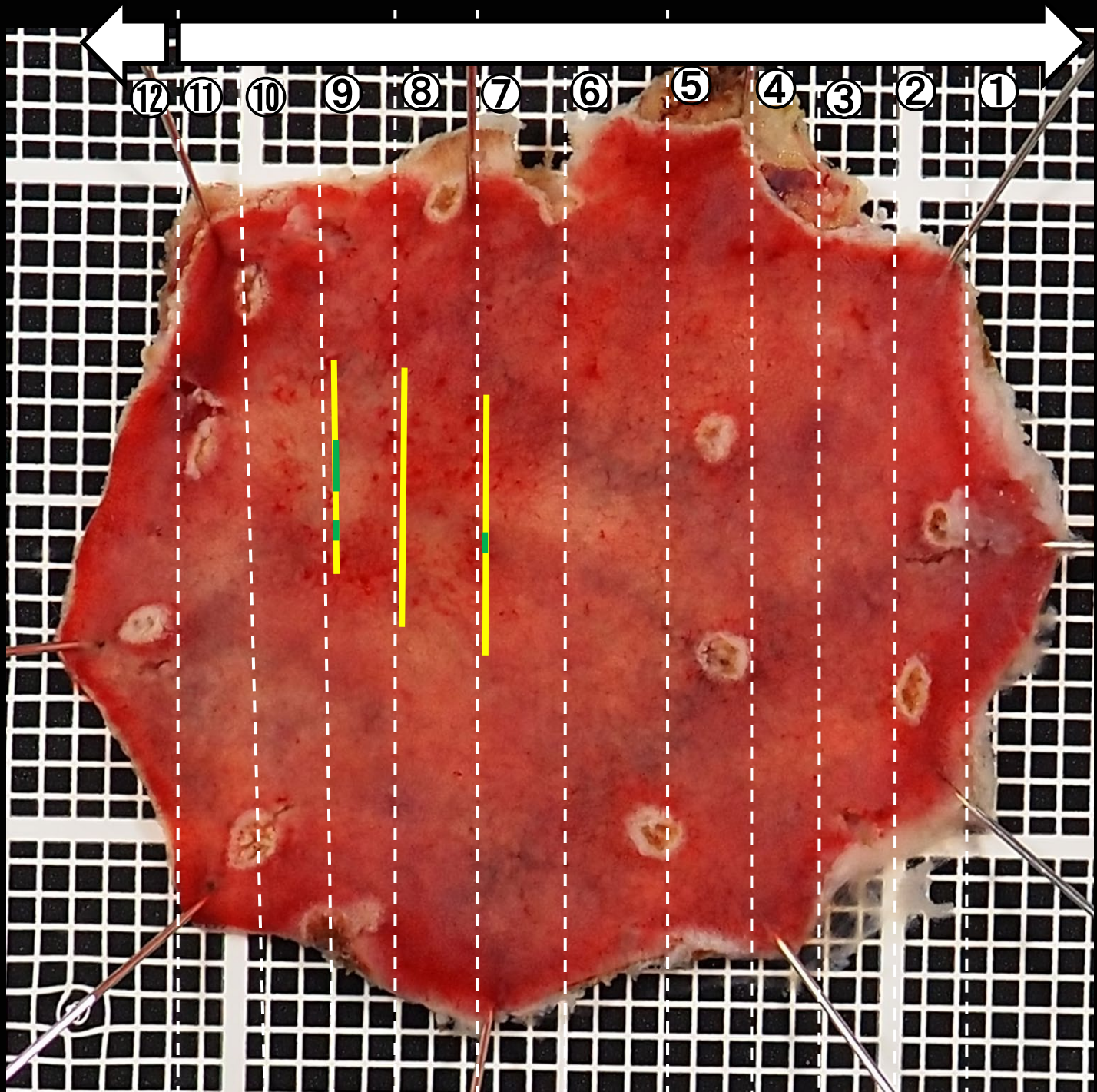
— M
— SM1



←
肛門側

→
口側

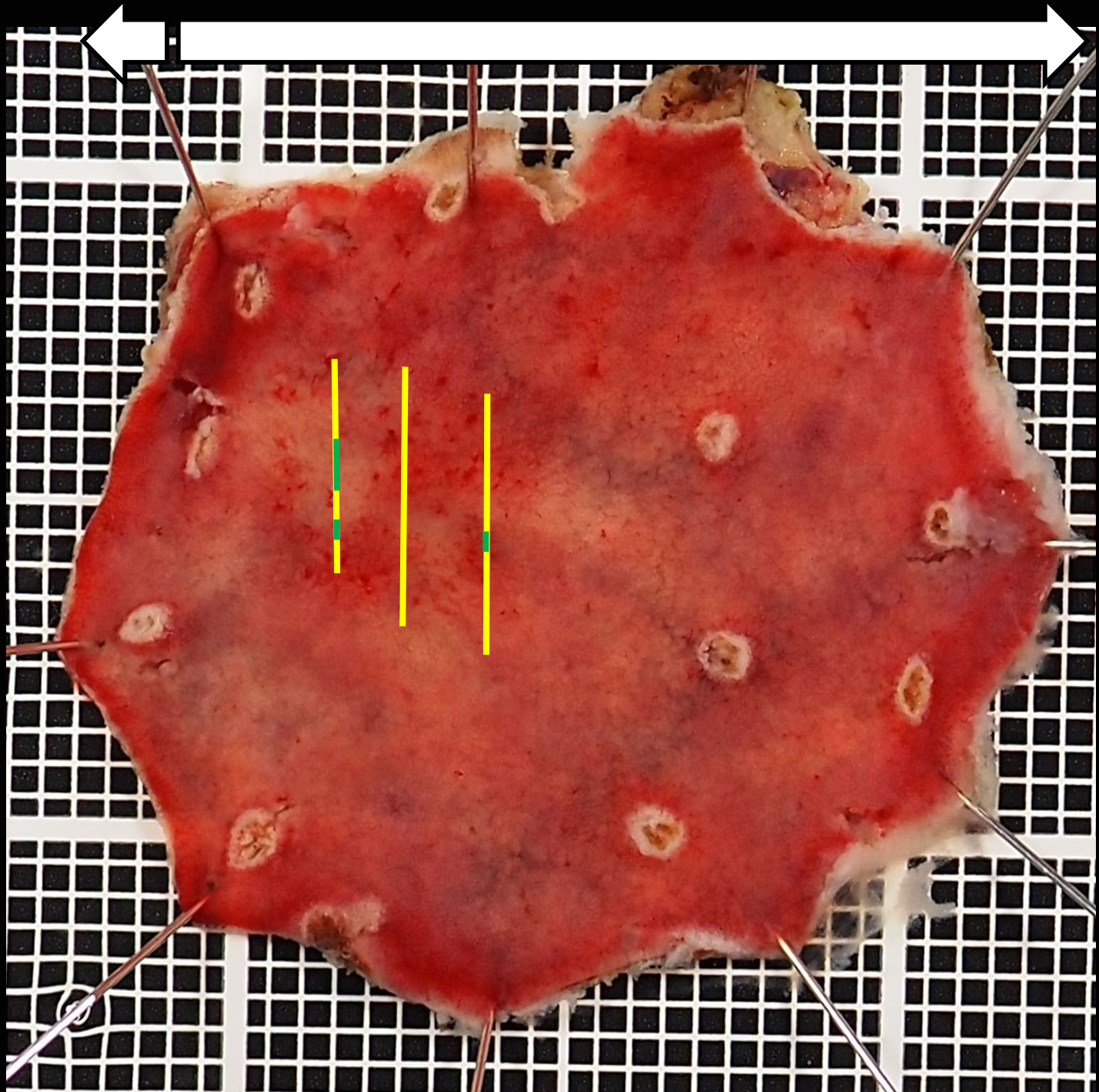
— M
— SM1



←
肛門側

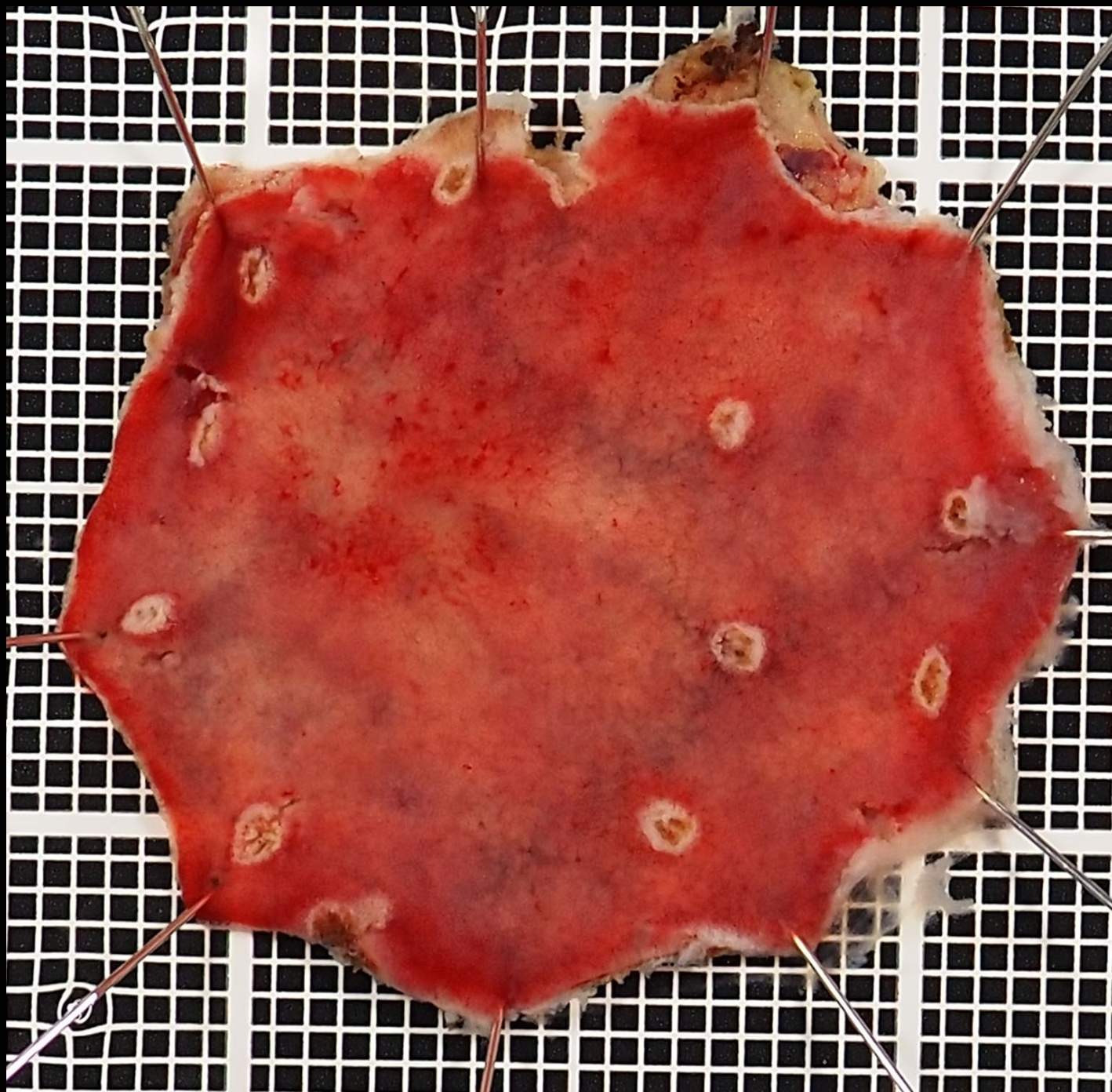
→
口側

— M
— SM1



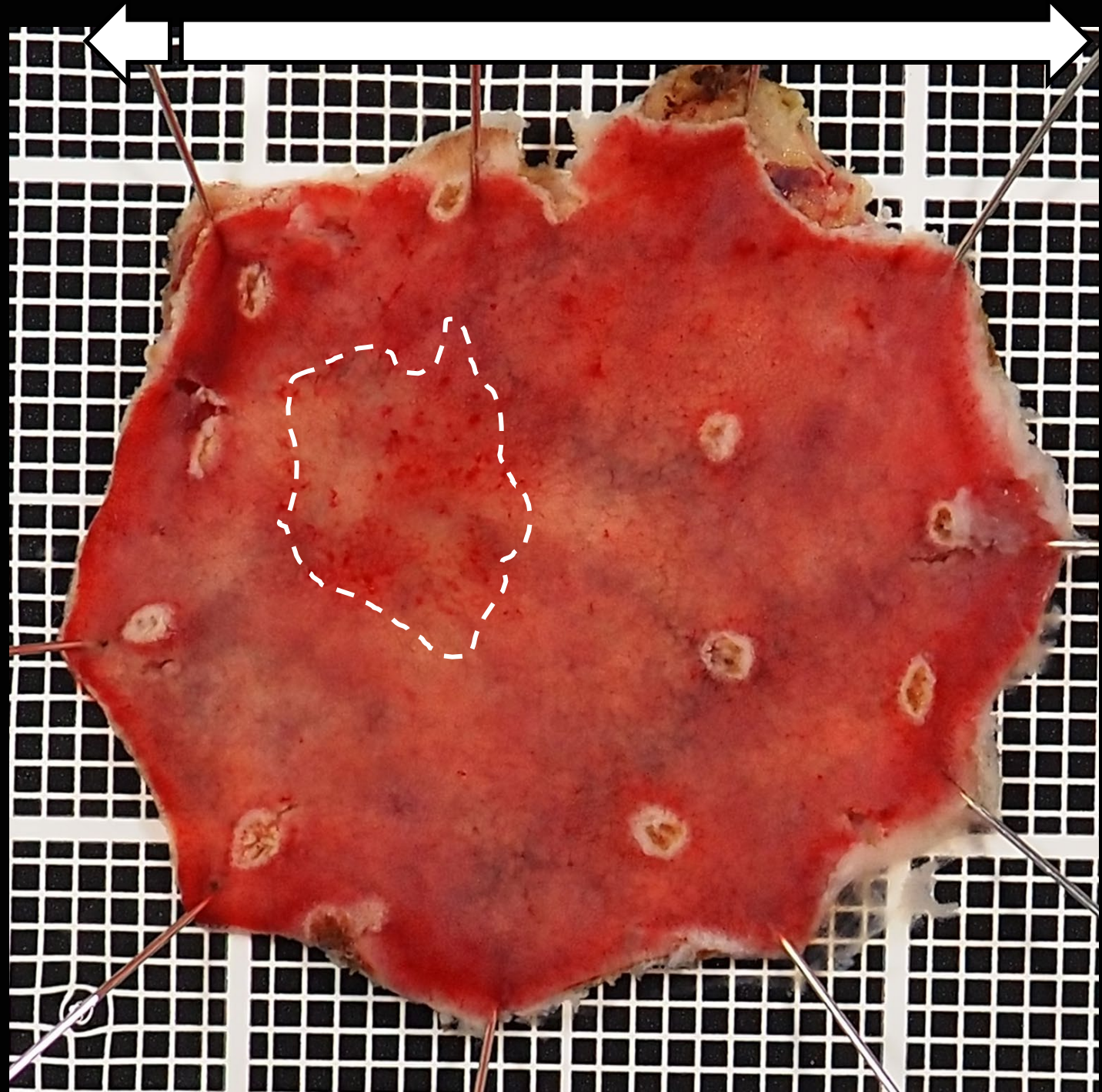


肛門側



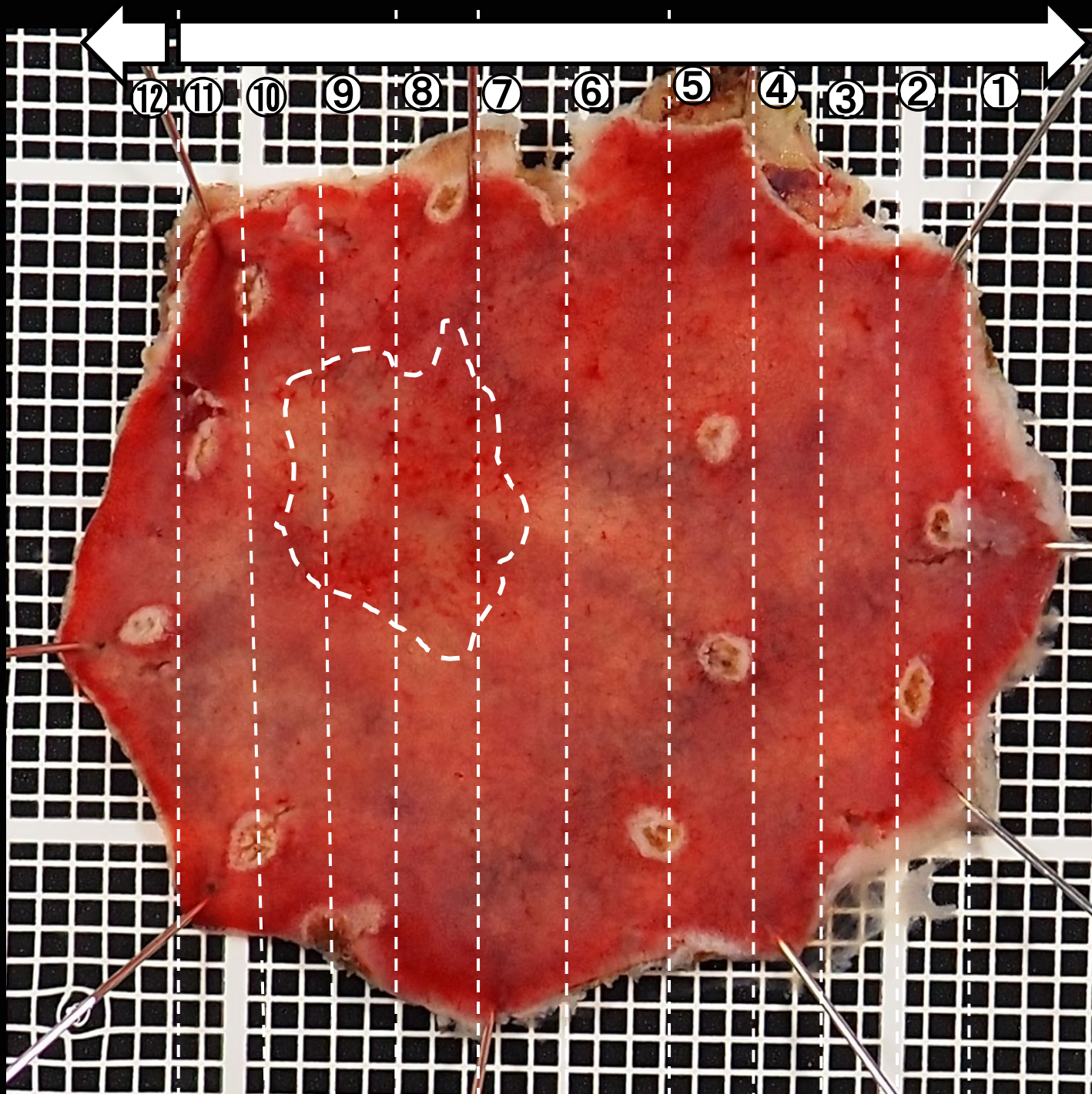
口側

←
肛門側



→
口側

←
肛門側

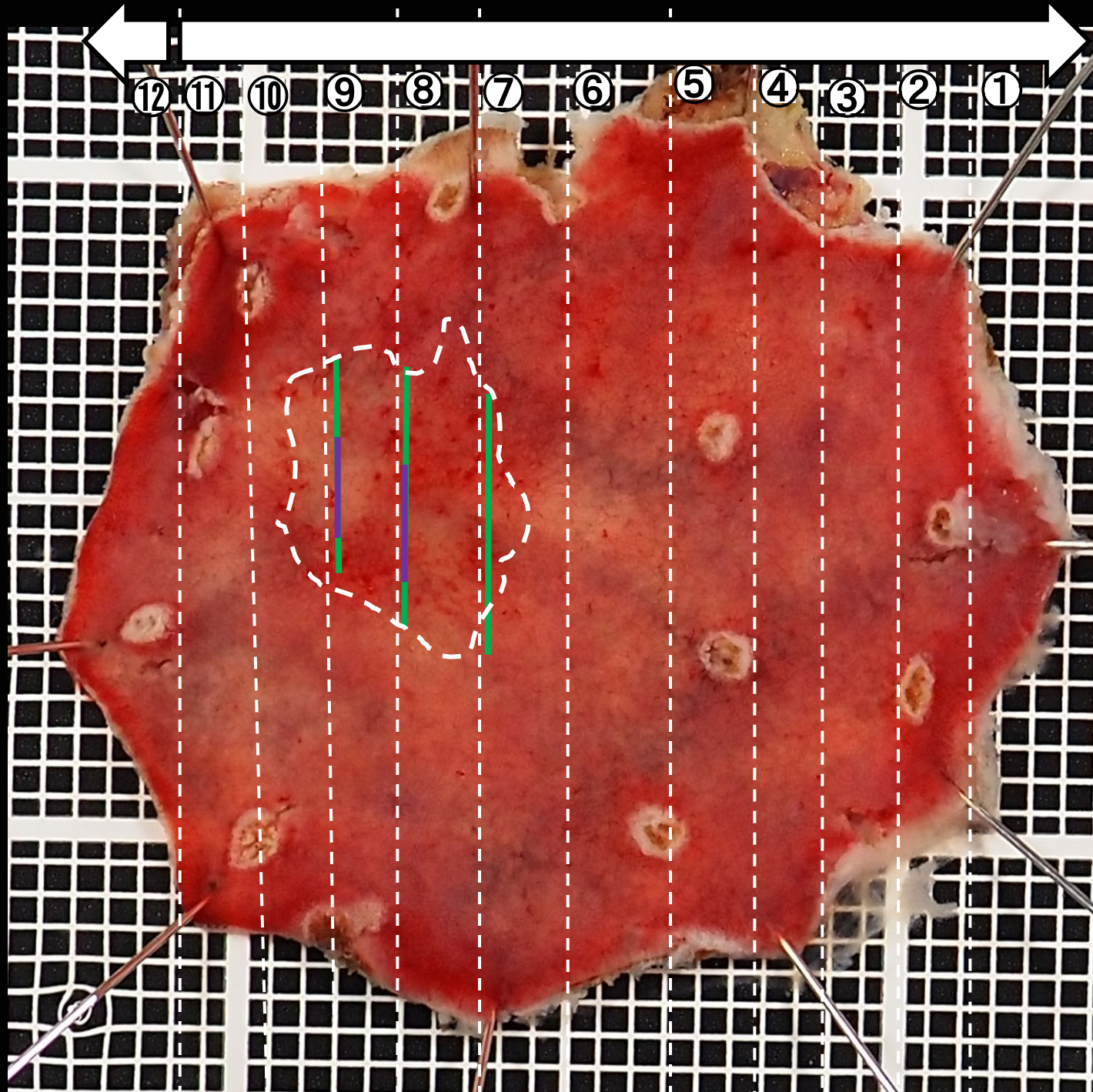


→
口側

←
肛門側

→
口側

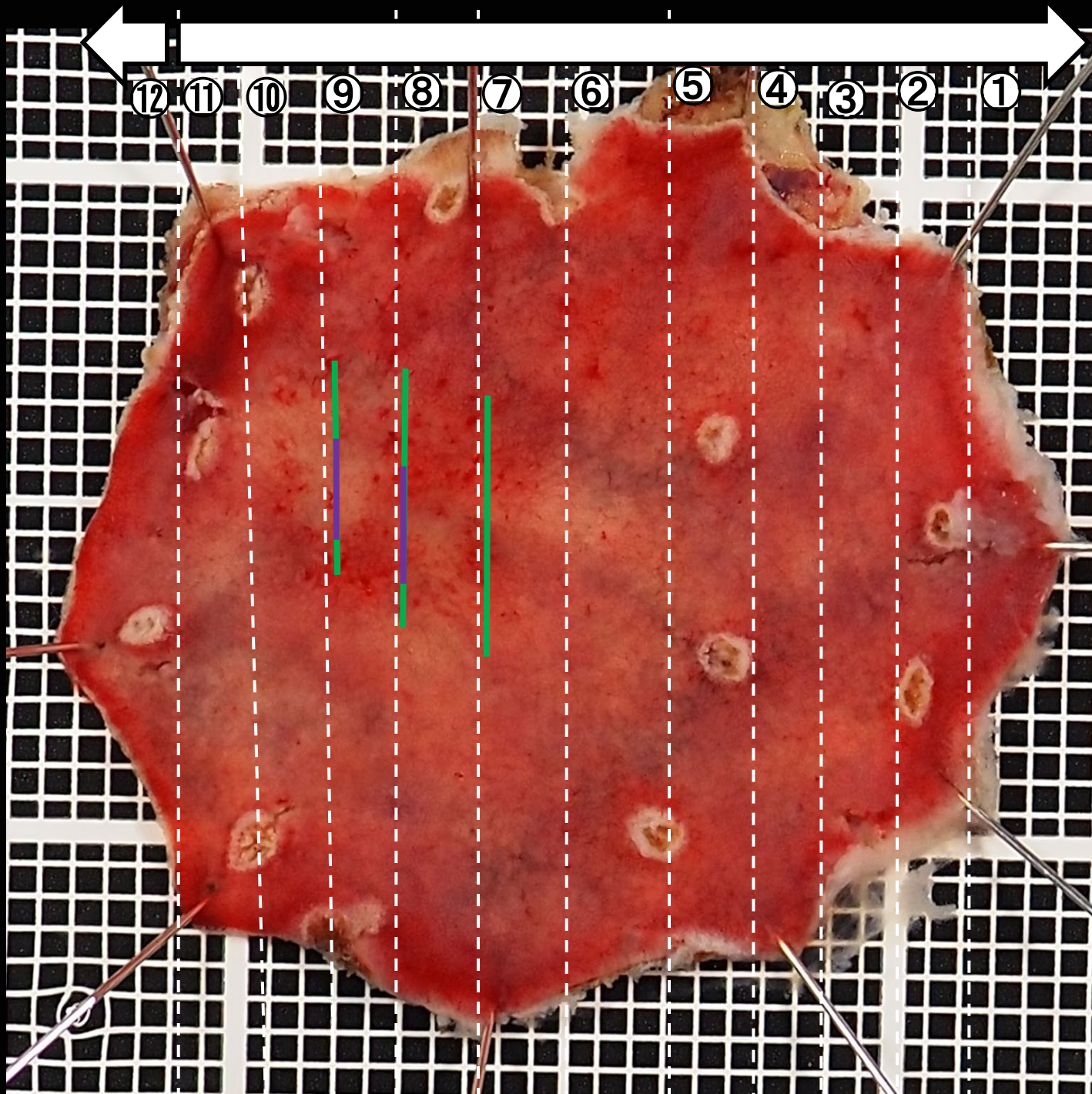
— tub1
— tub2



←
肛門側

→
口側

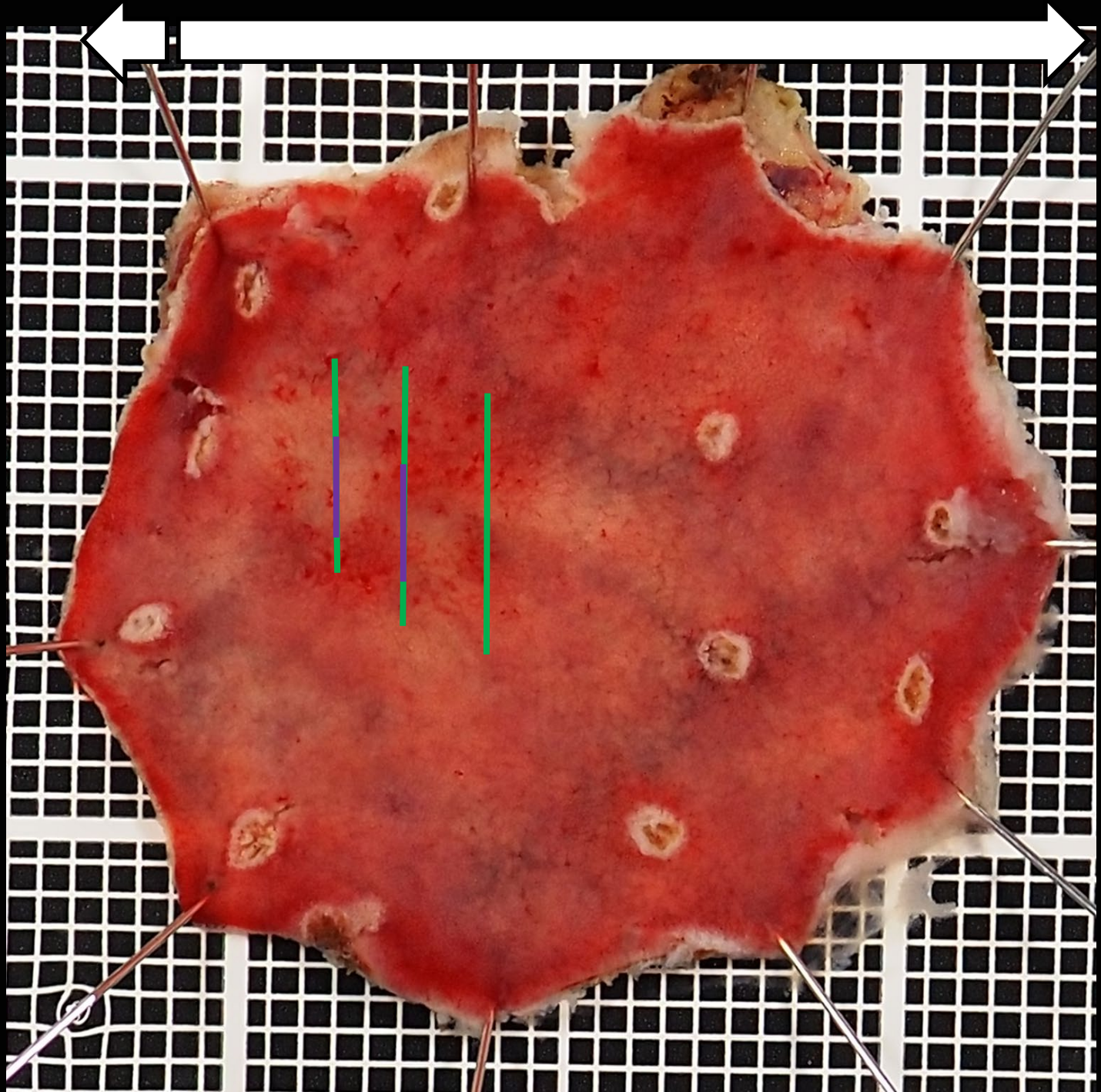
— tub1
— tub2



←
肛門側

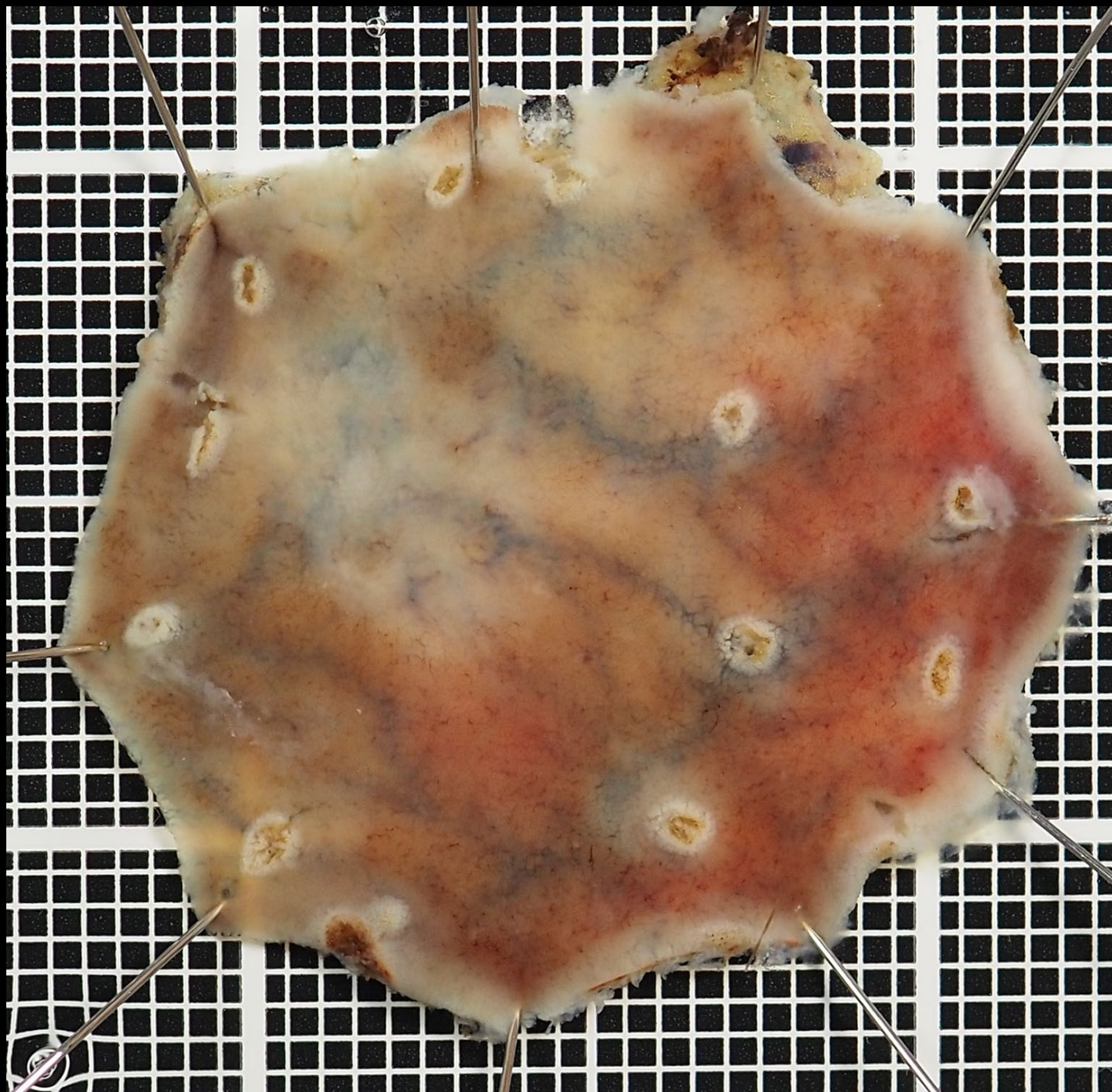
→
口側

— tub1
— tub2





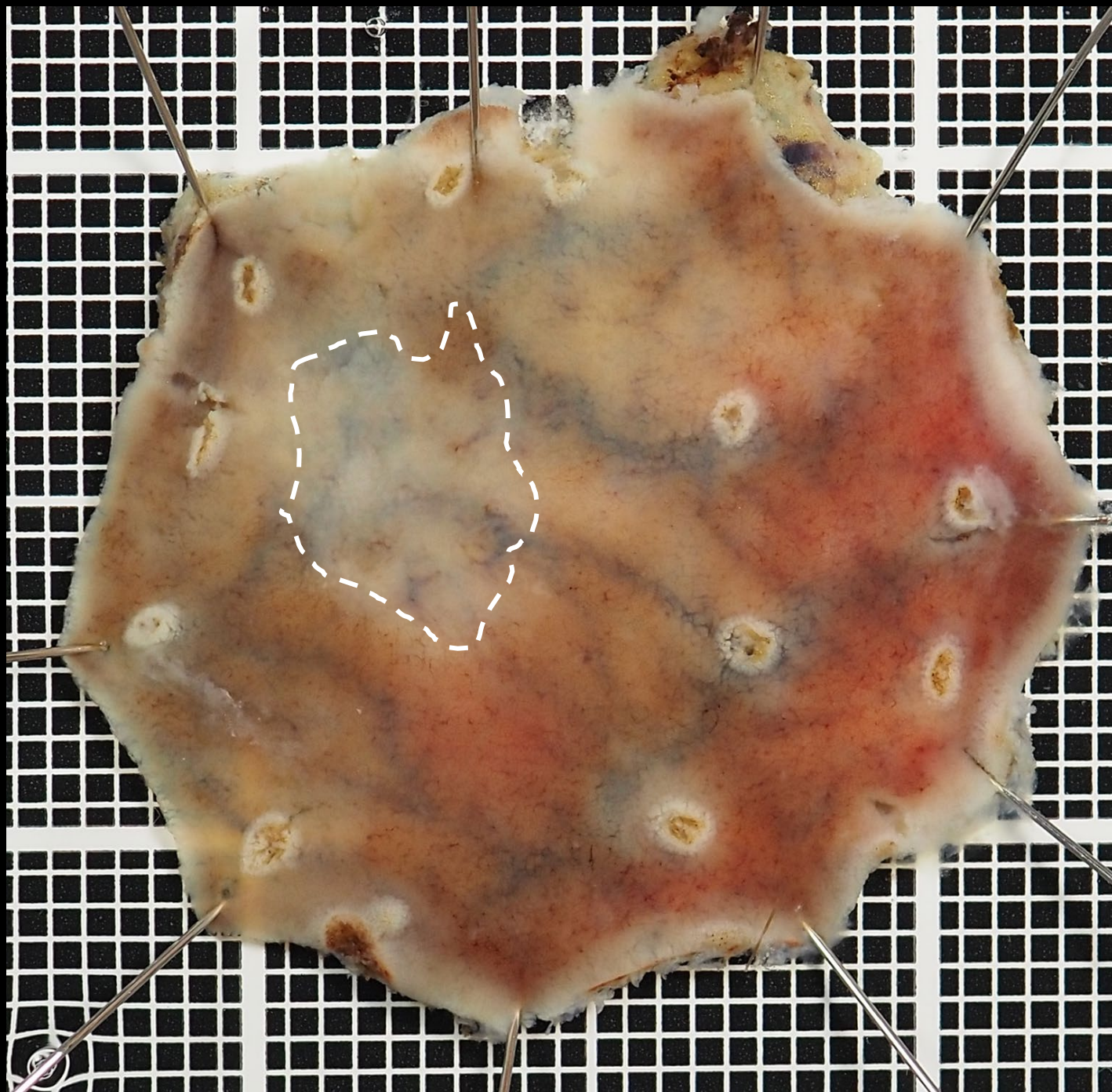
肛門側



口側

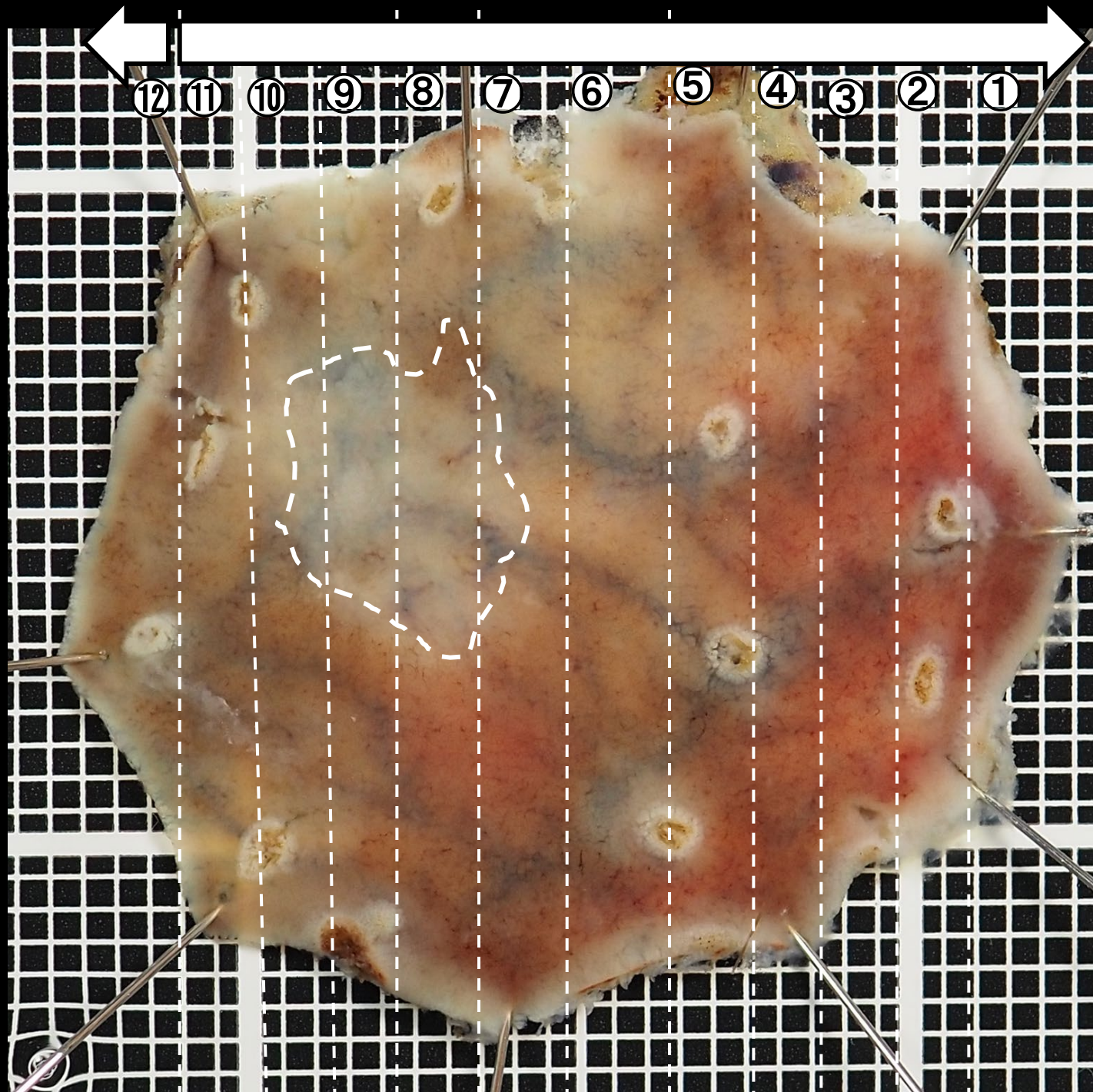


肛門側



口側

←
肛門側

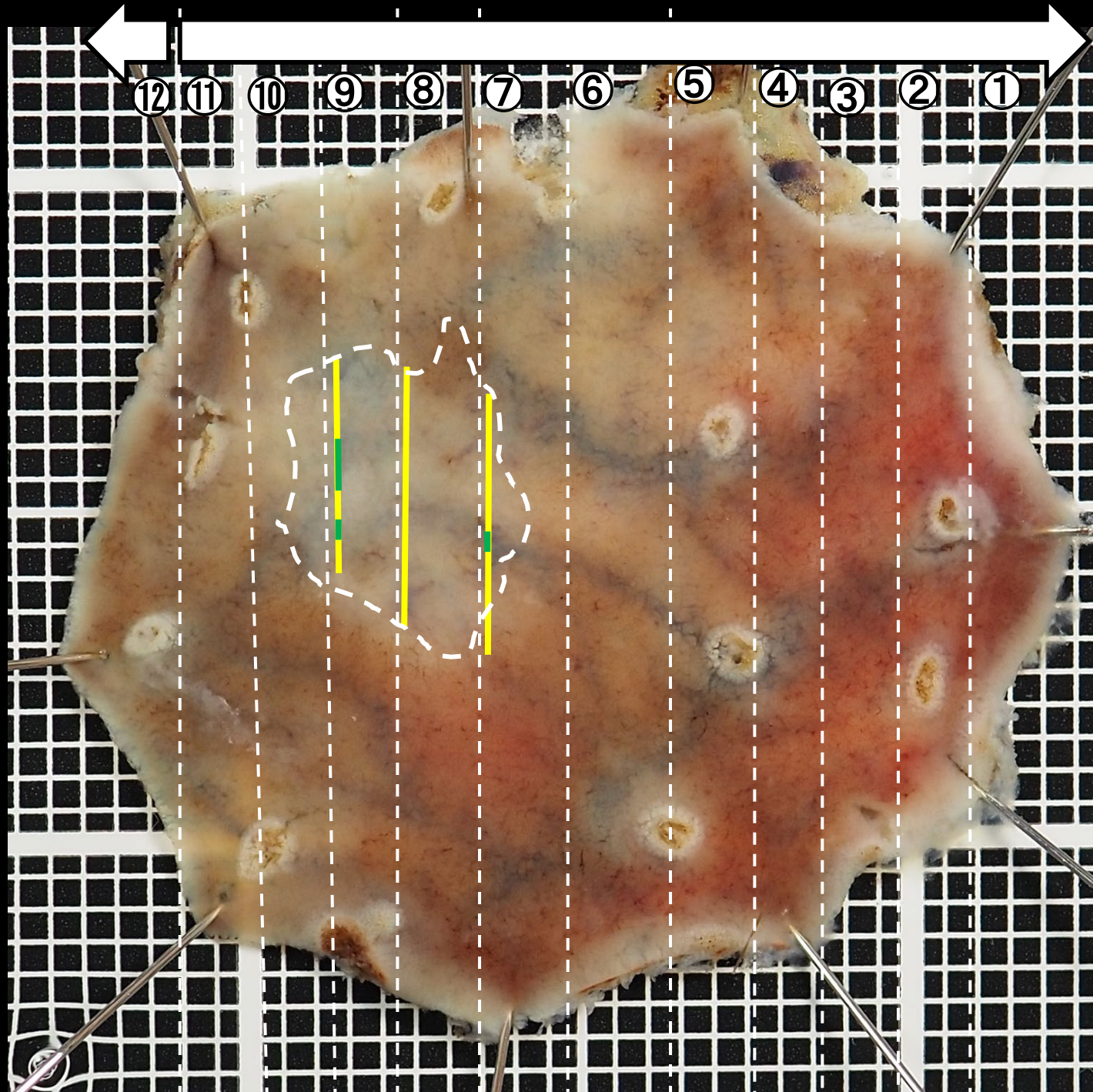


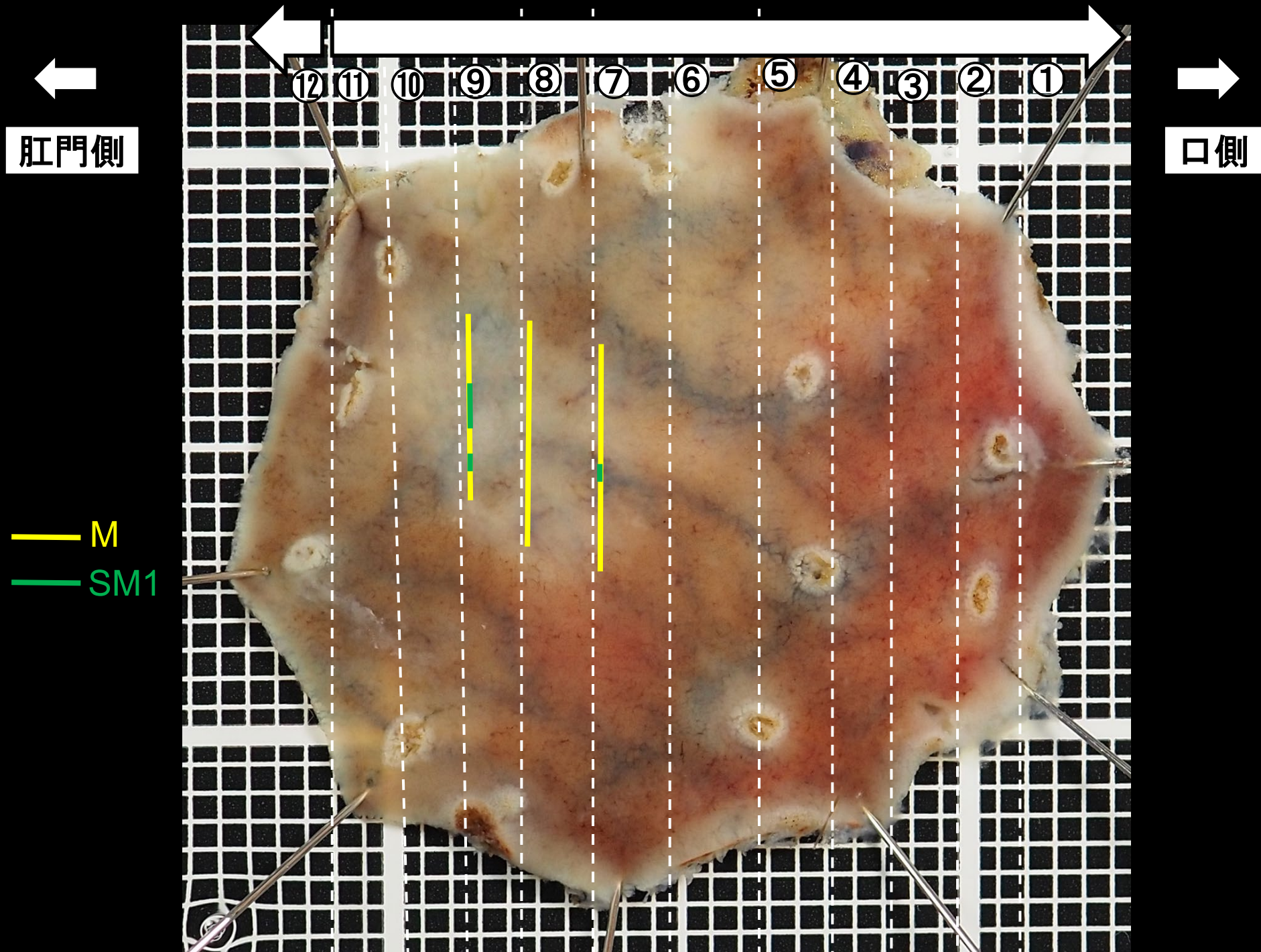
→
口側

←
肛門側

→
口側

— M
— SM1



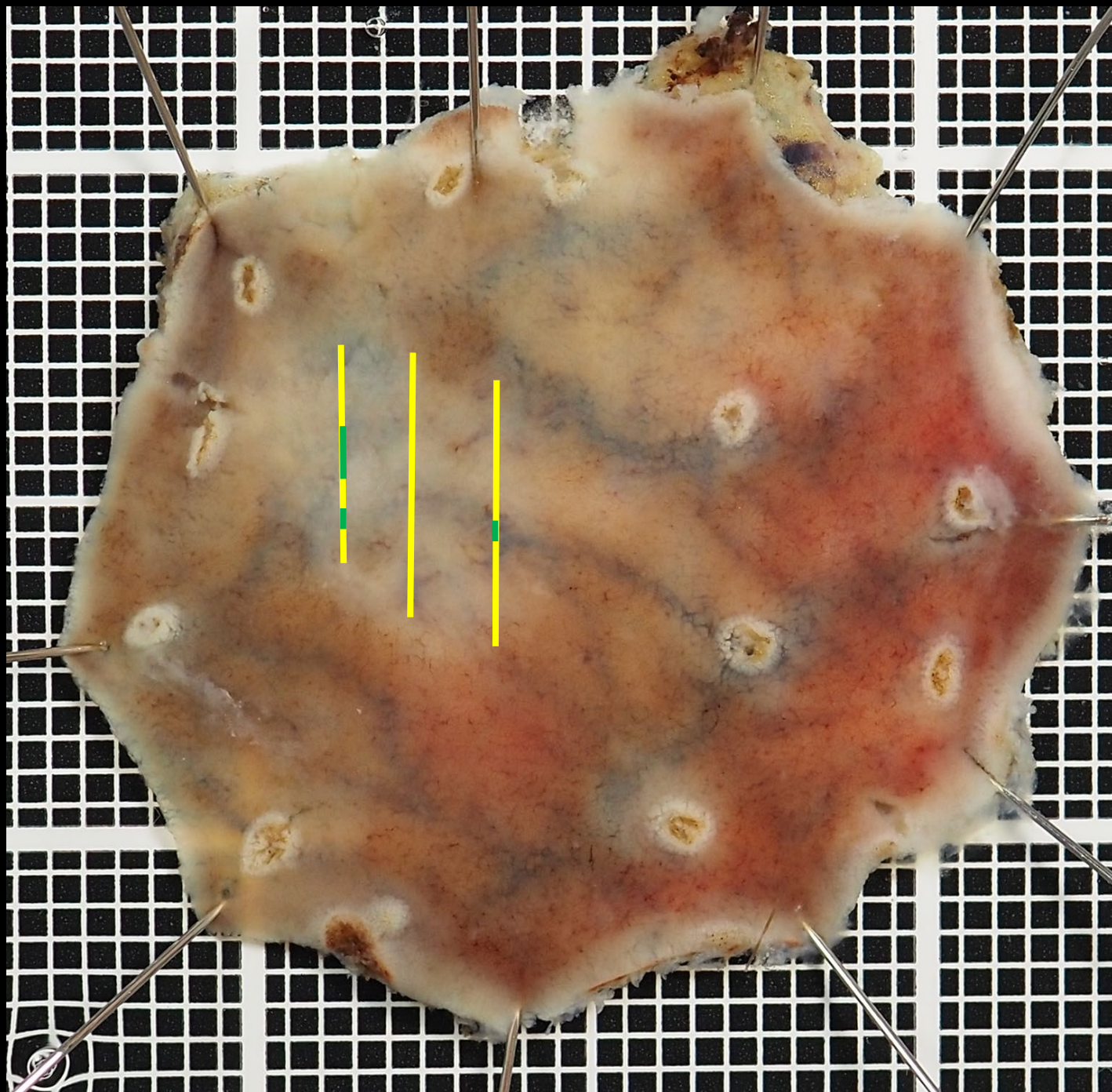




肛門側



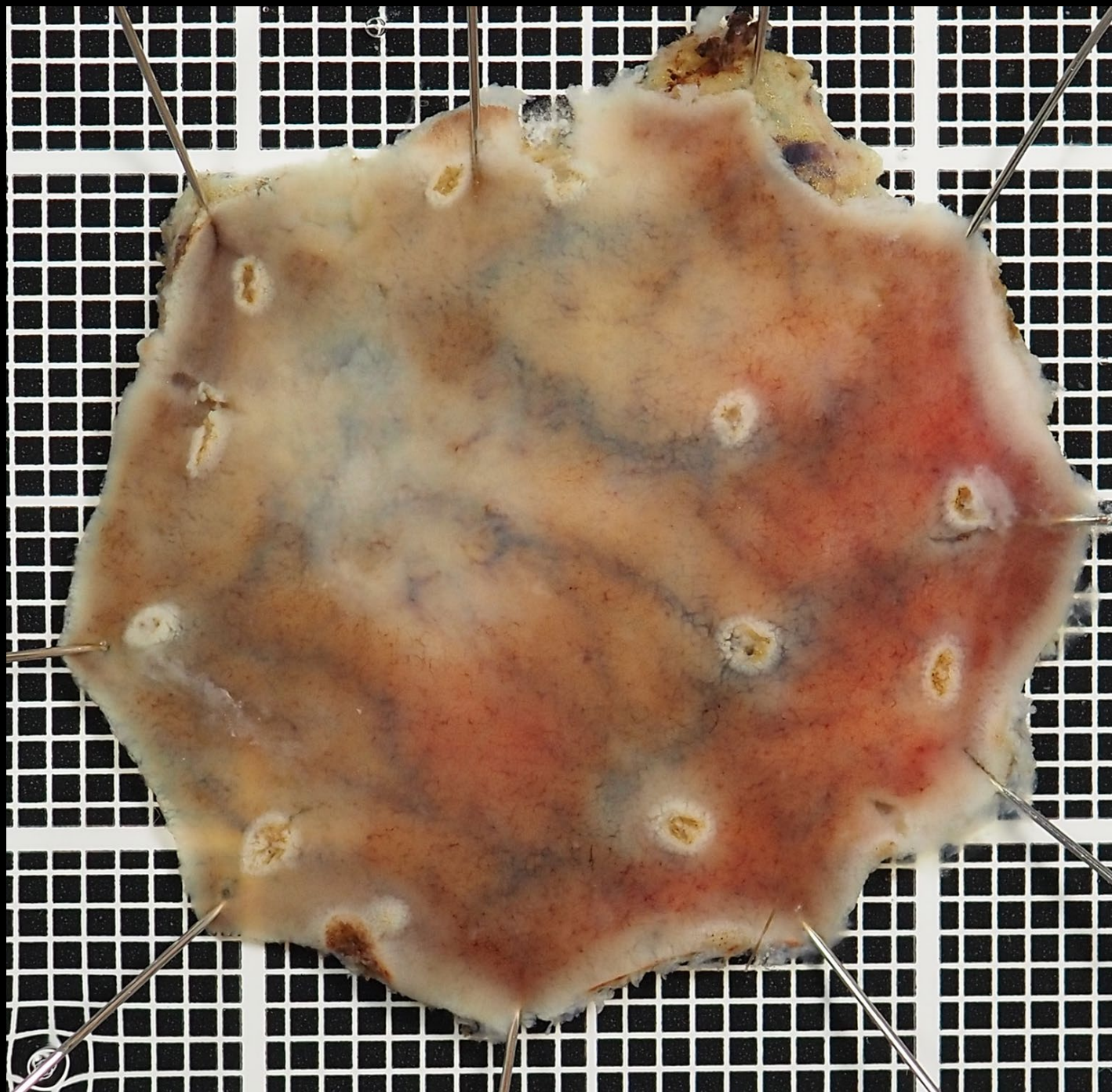
口側



— M
— SM1



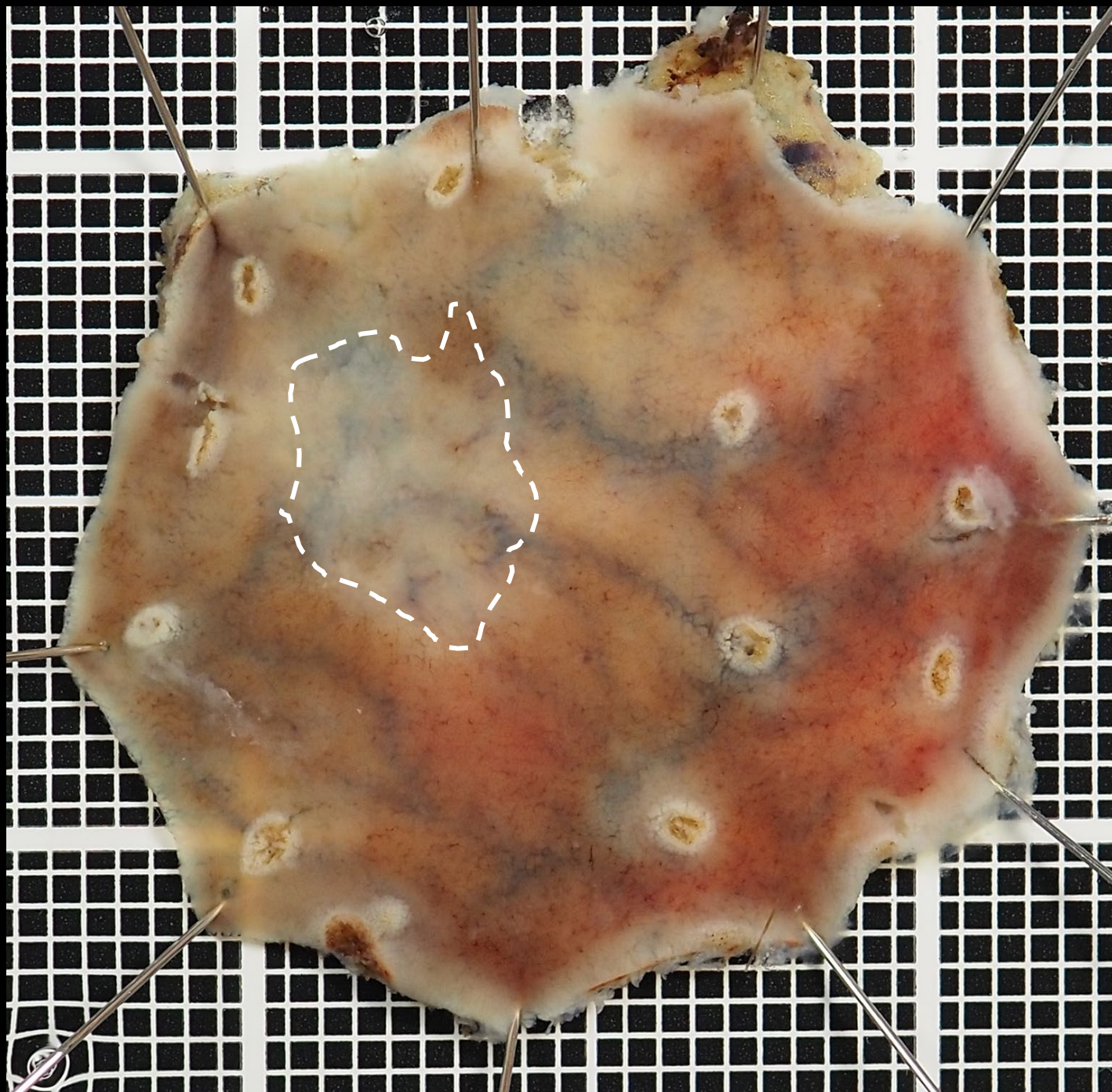
肛門側



口側



肛門側

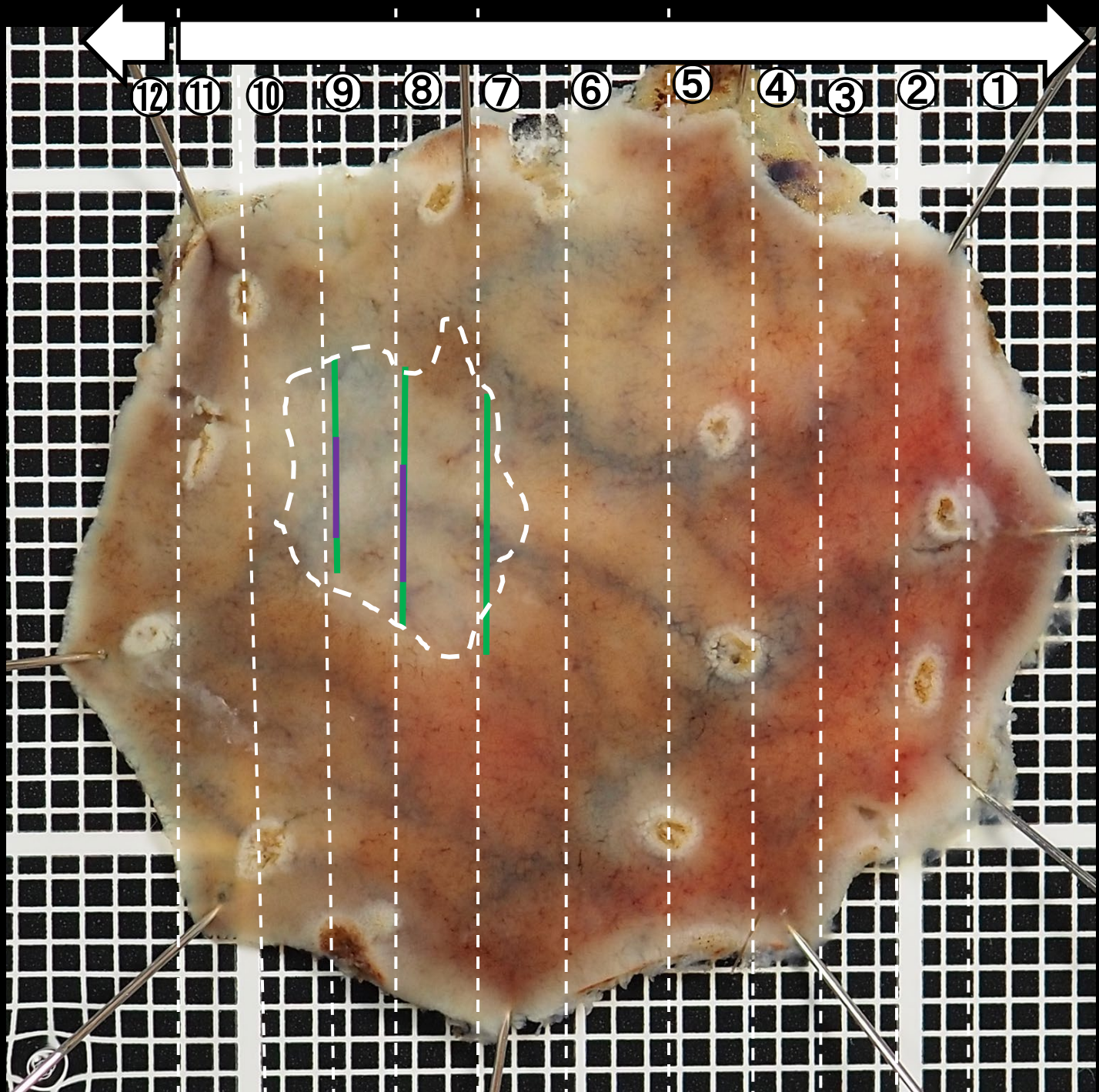


口側

←
肛門側

→
口側

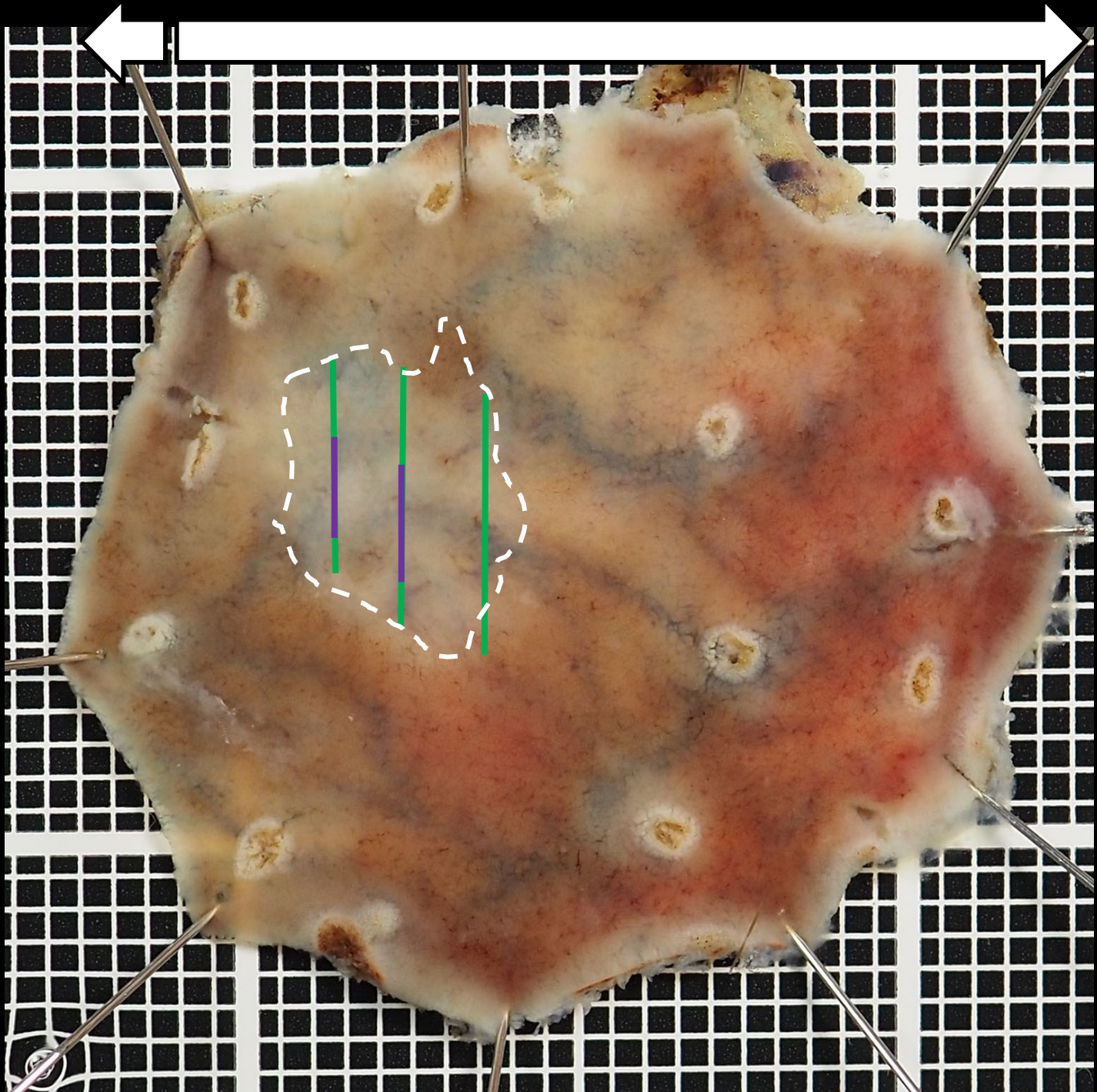
— tub1
— tub2



←
肛門側

→
口側

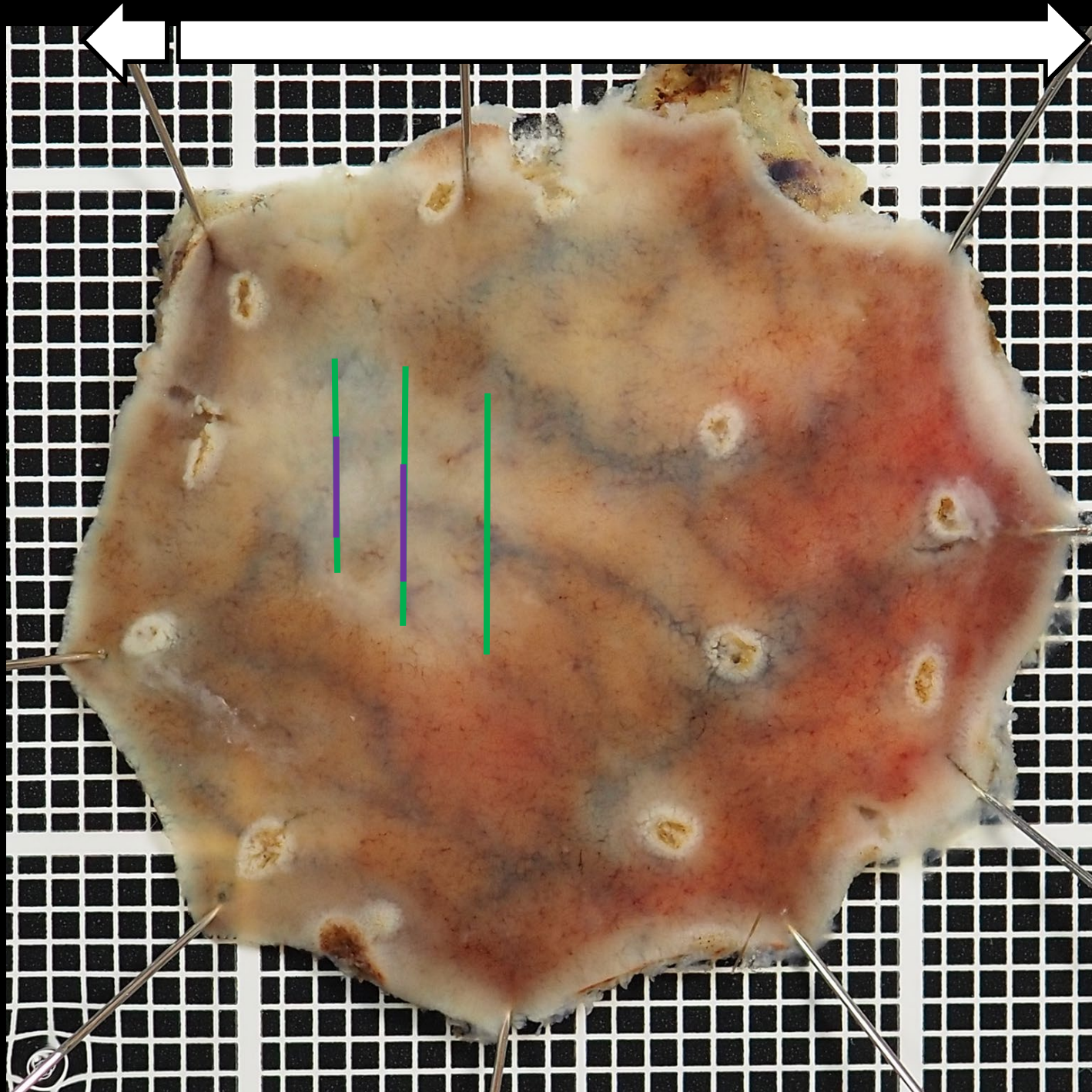
— tub1
— tub2



←
肛門側

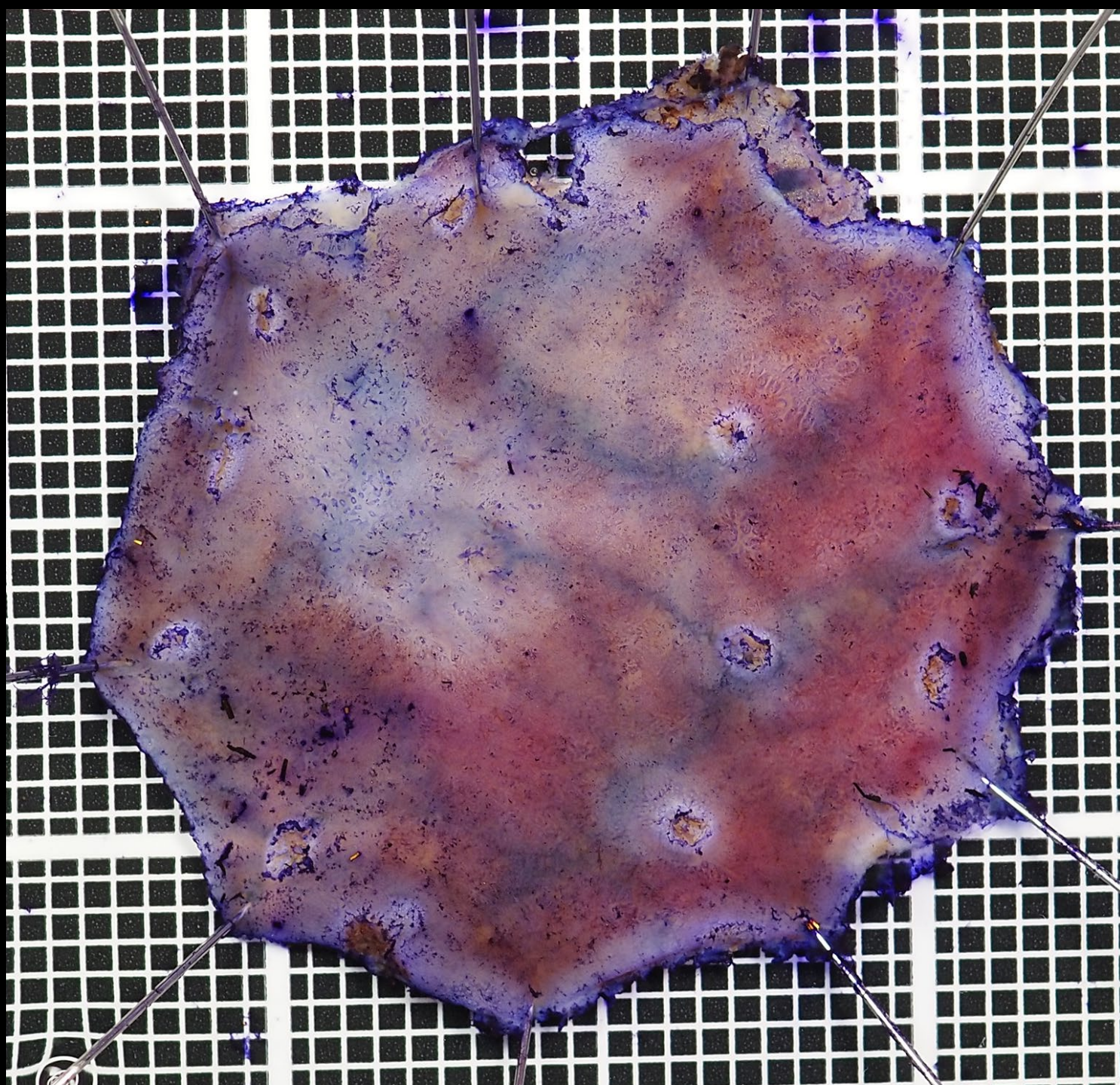
→
口側

— tub1
— tub2





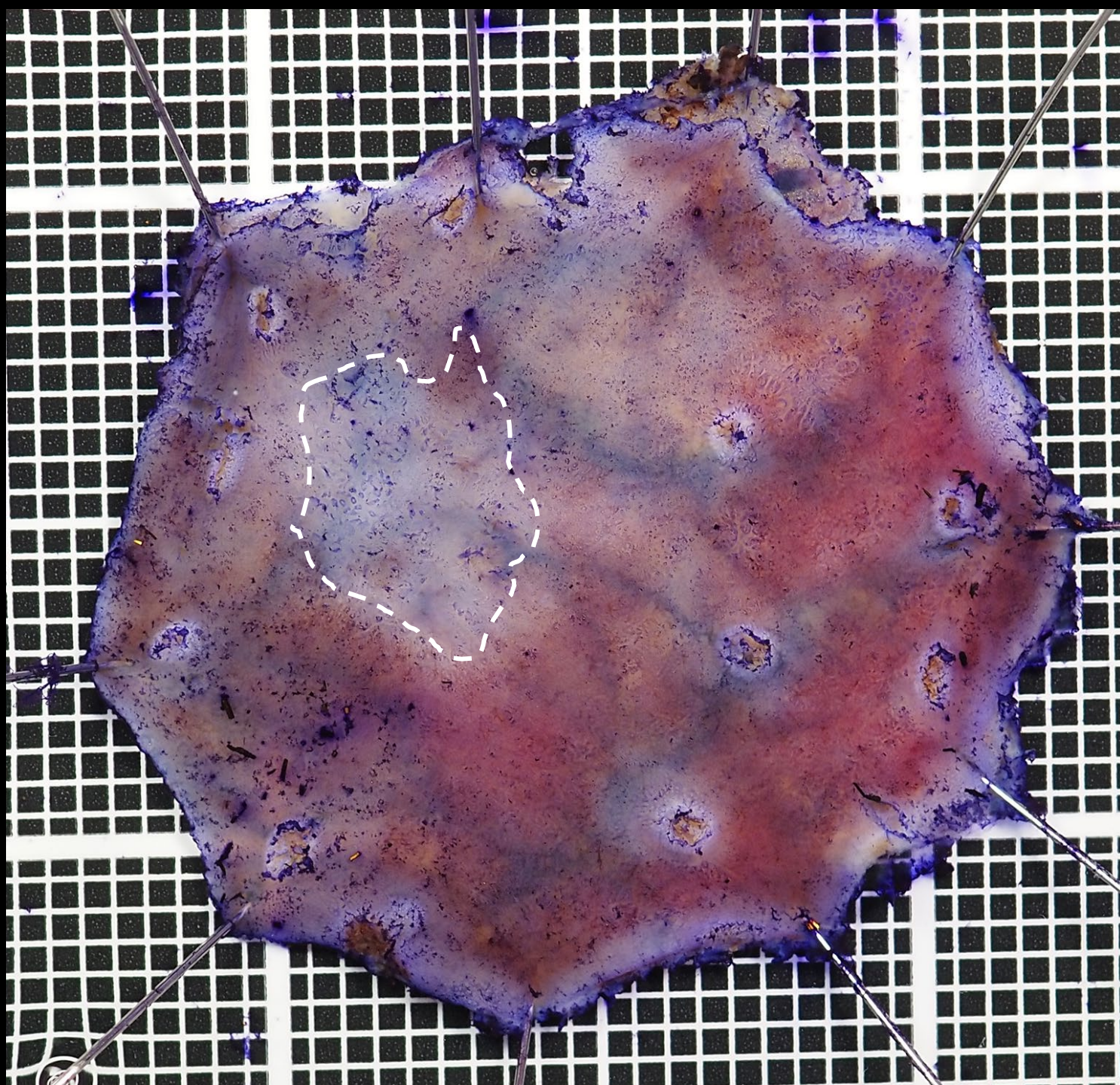
肛門側



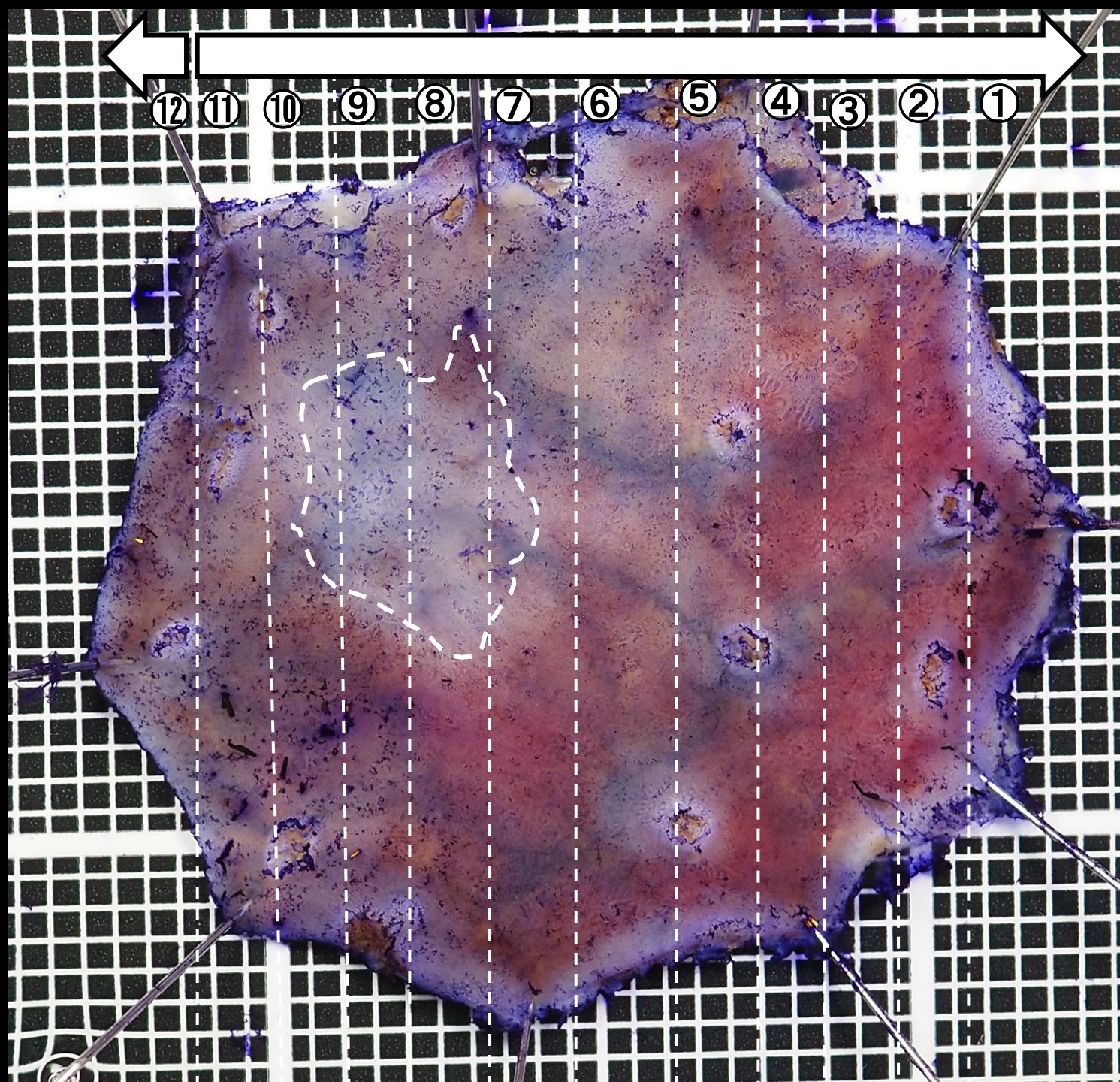
口側



肛門側



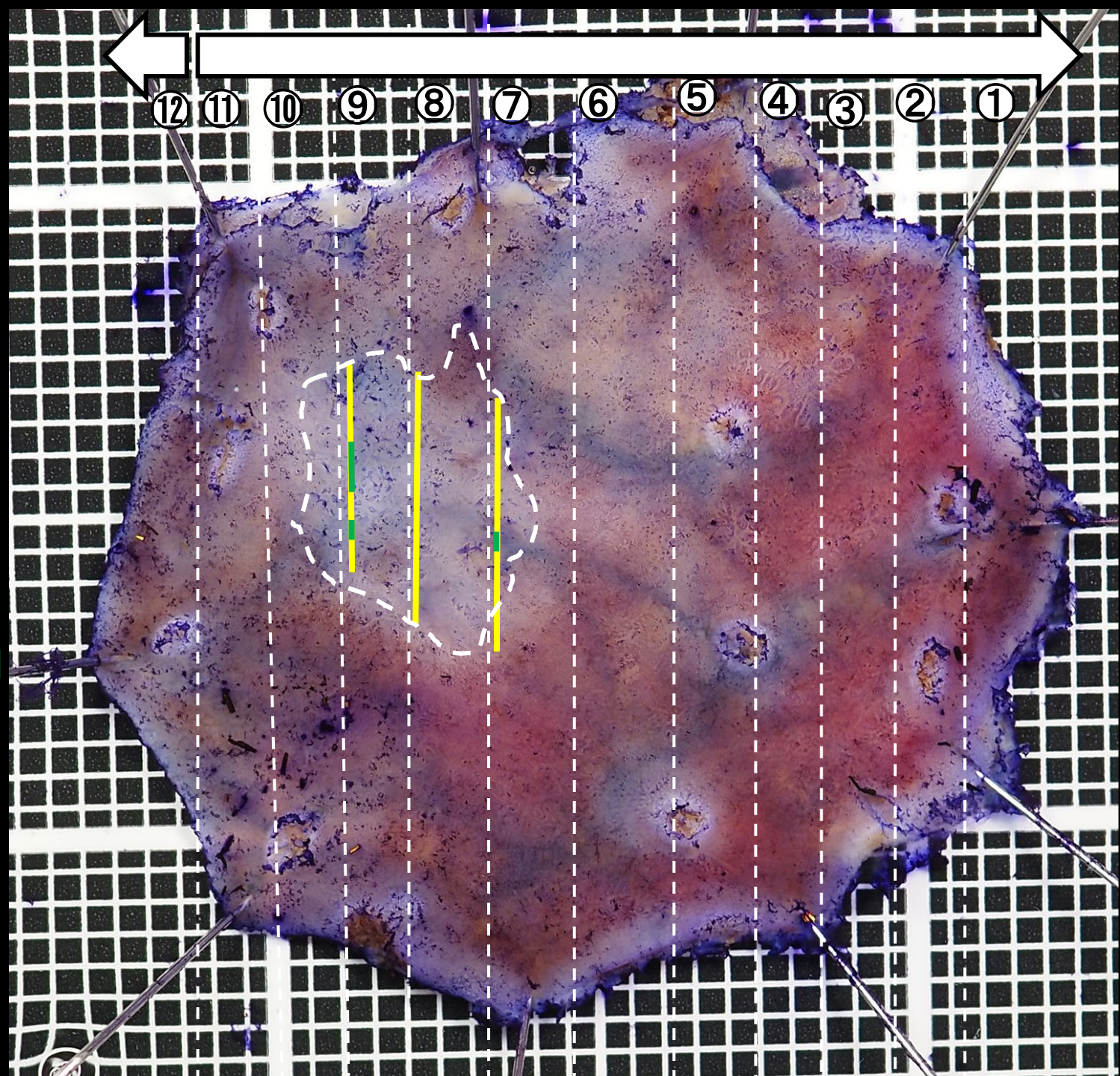
口側



肛門側



口側

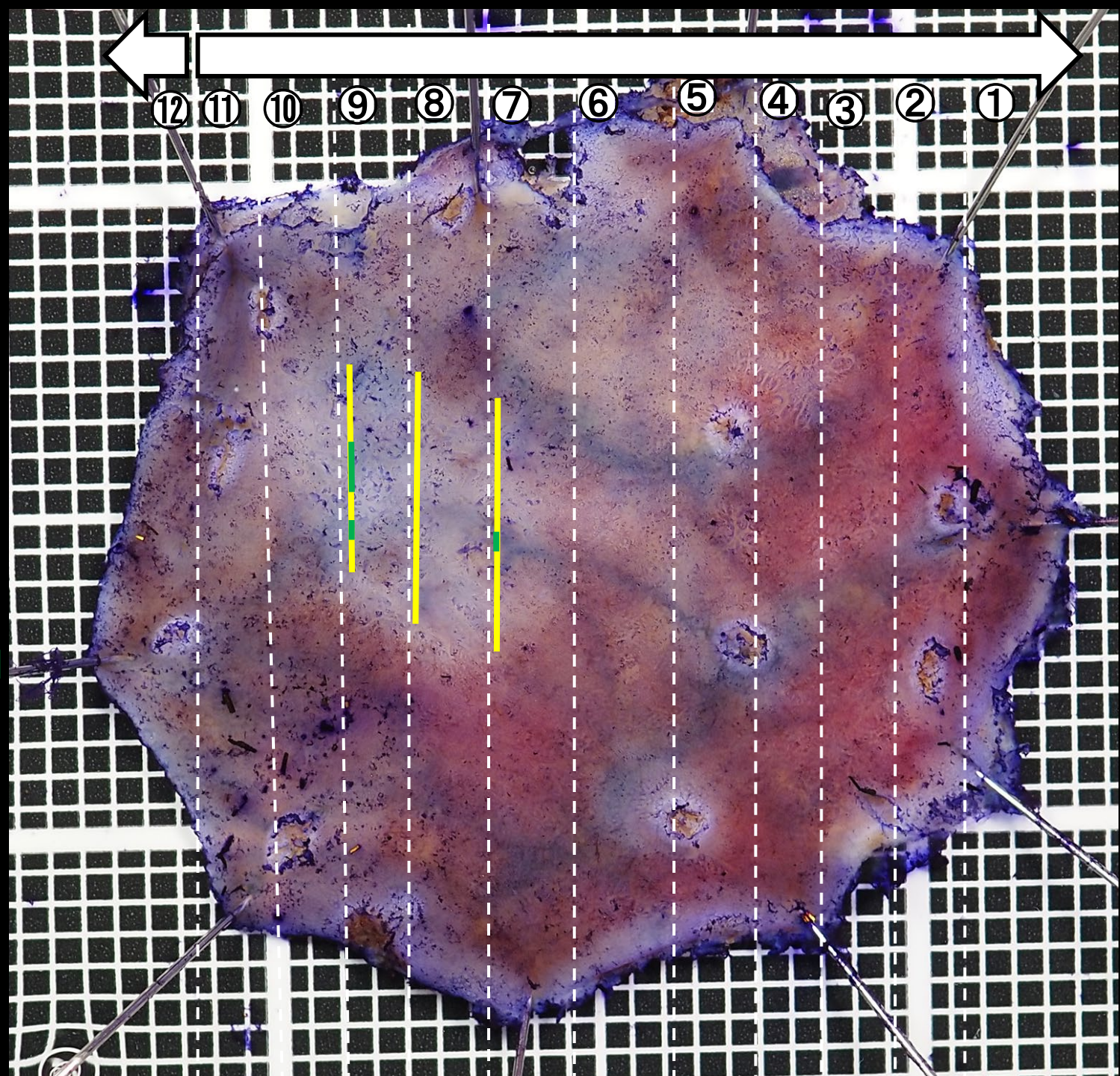


肛門側



口側

— M
— SM1



肛門側



口側

— M
— SM1

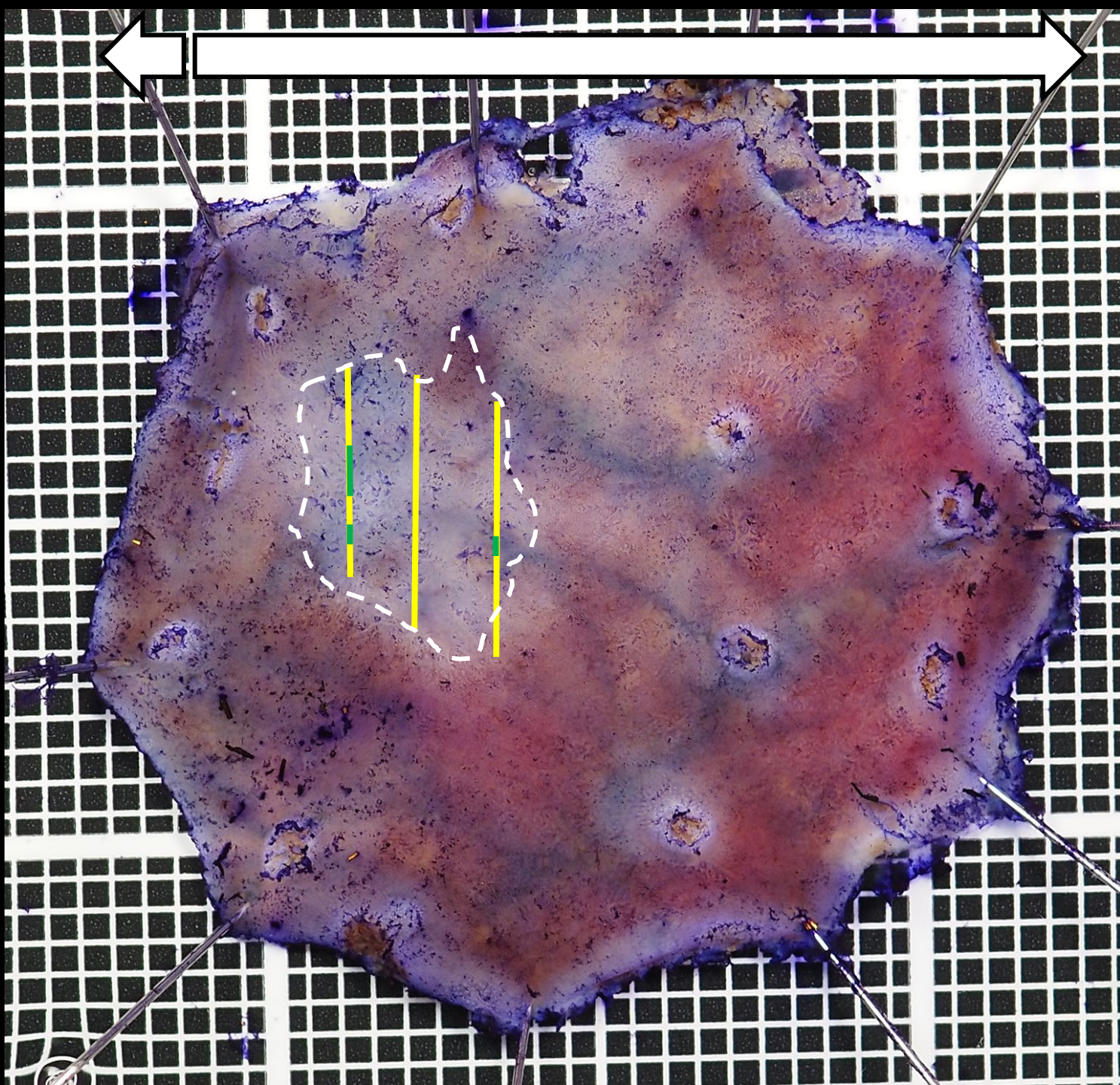


肛門側



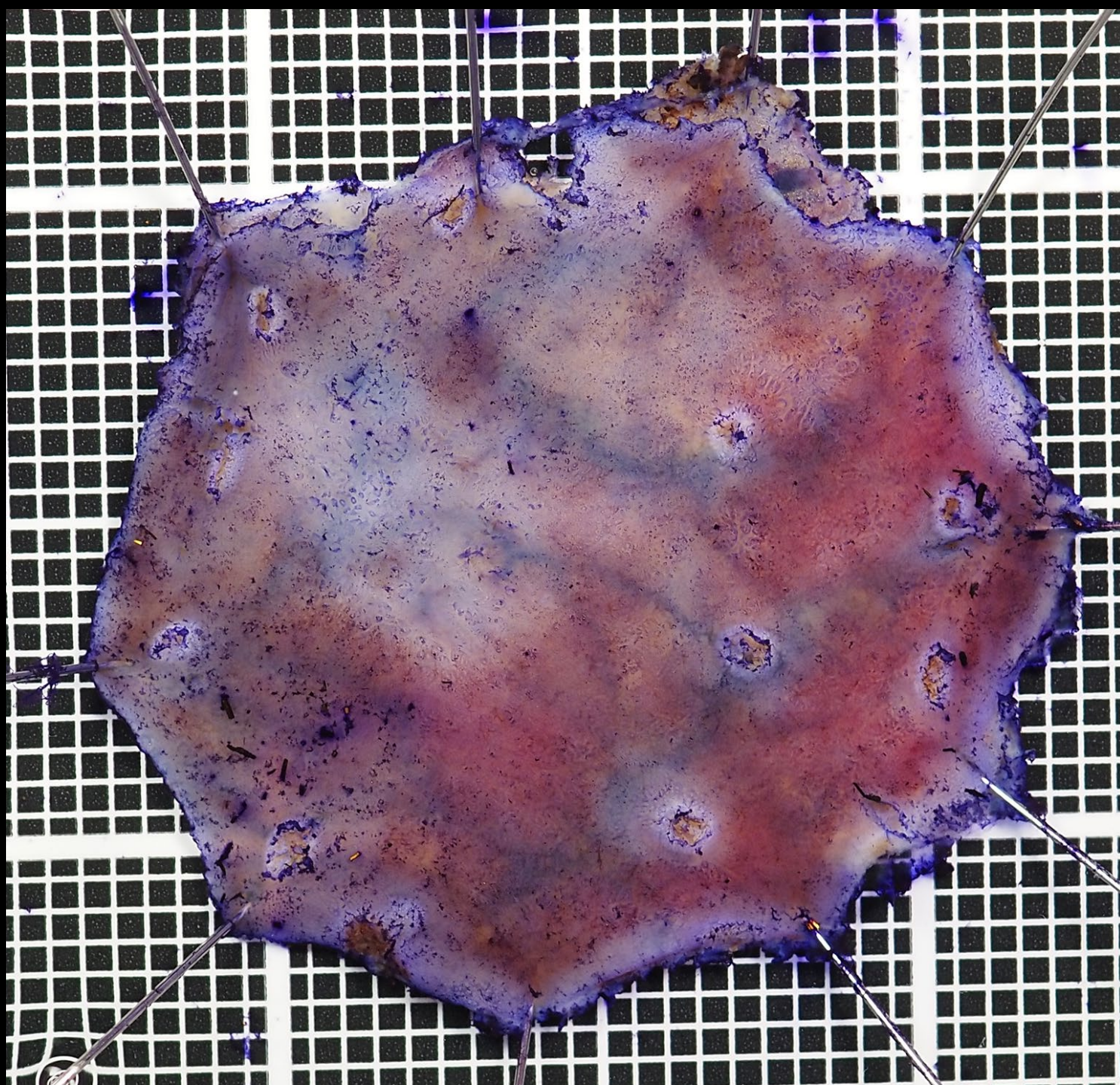
口側

— M
— SM1





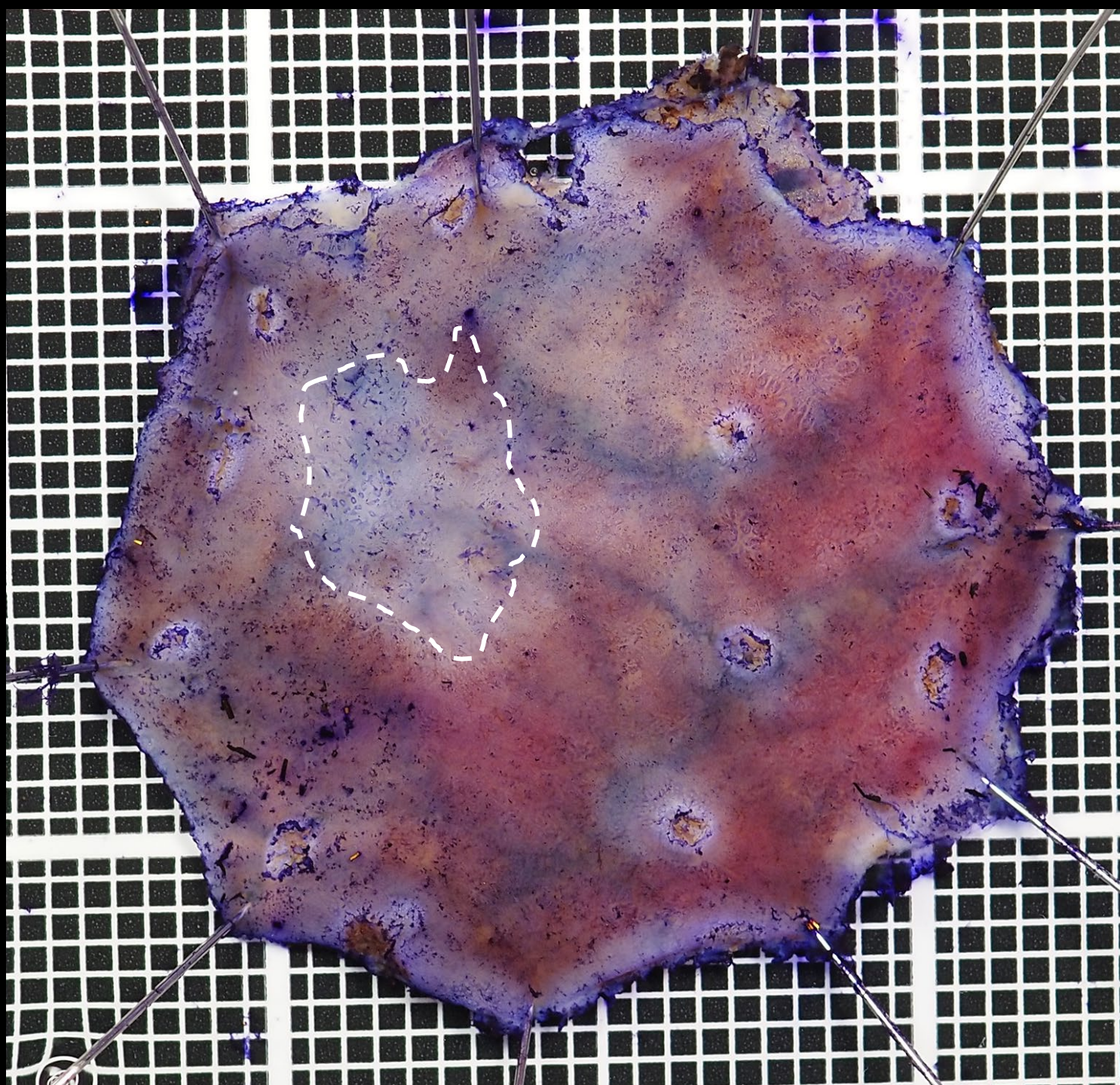
肛門側



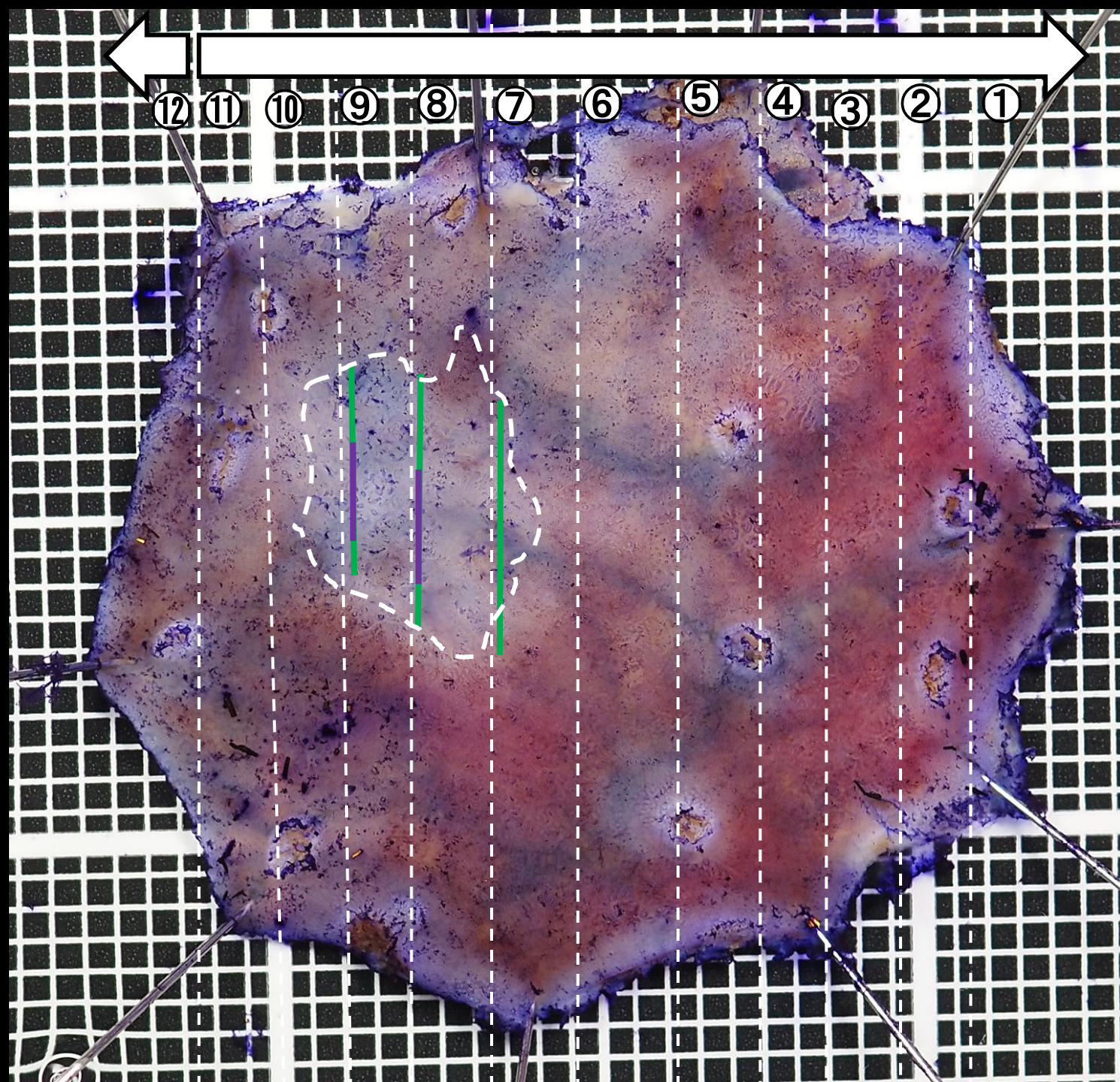
口側



肛門側



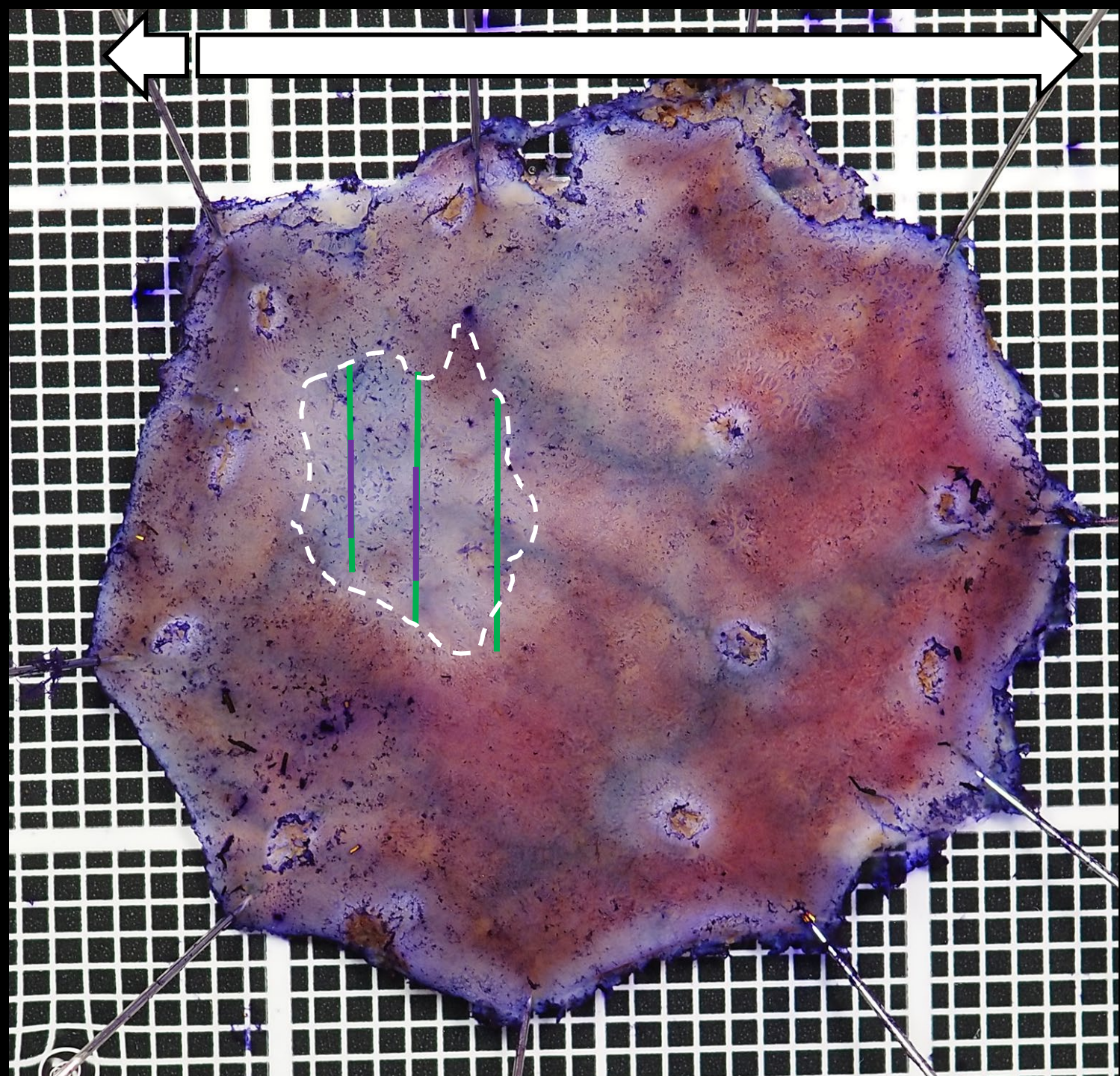
口側



肛門側

口側

tub1
tub2



肛門側

口側

tub1
tub2

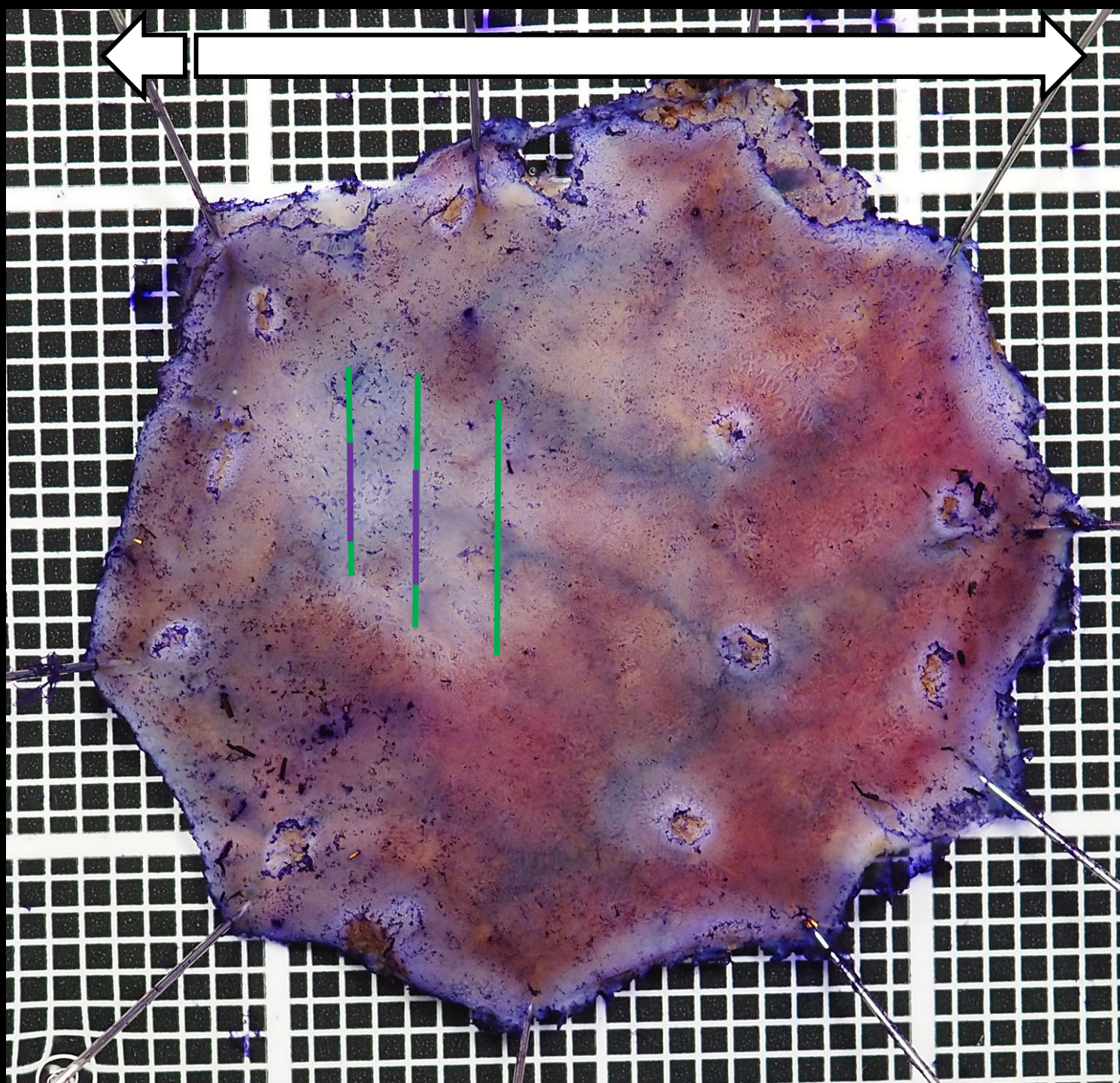


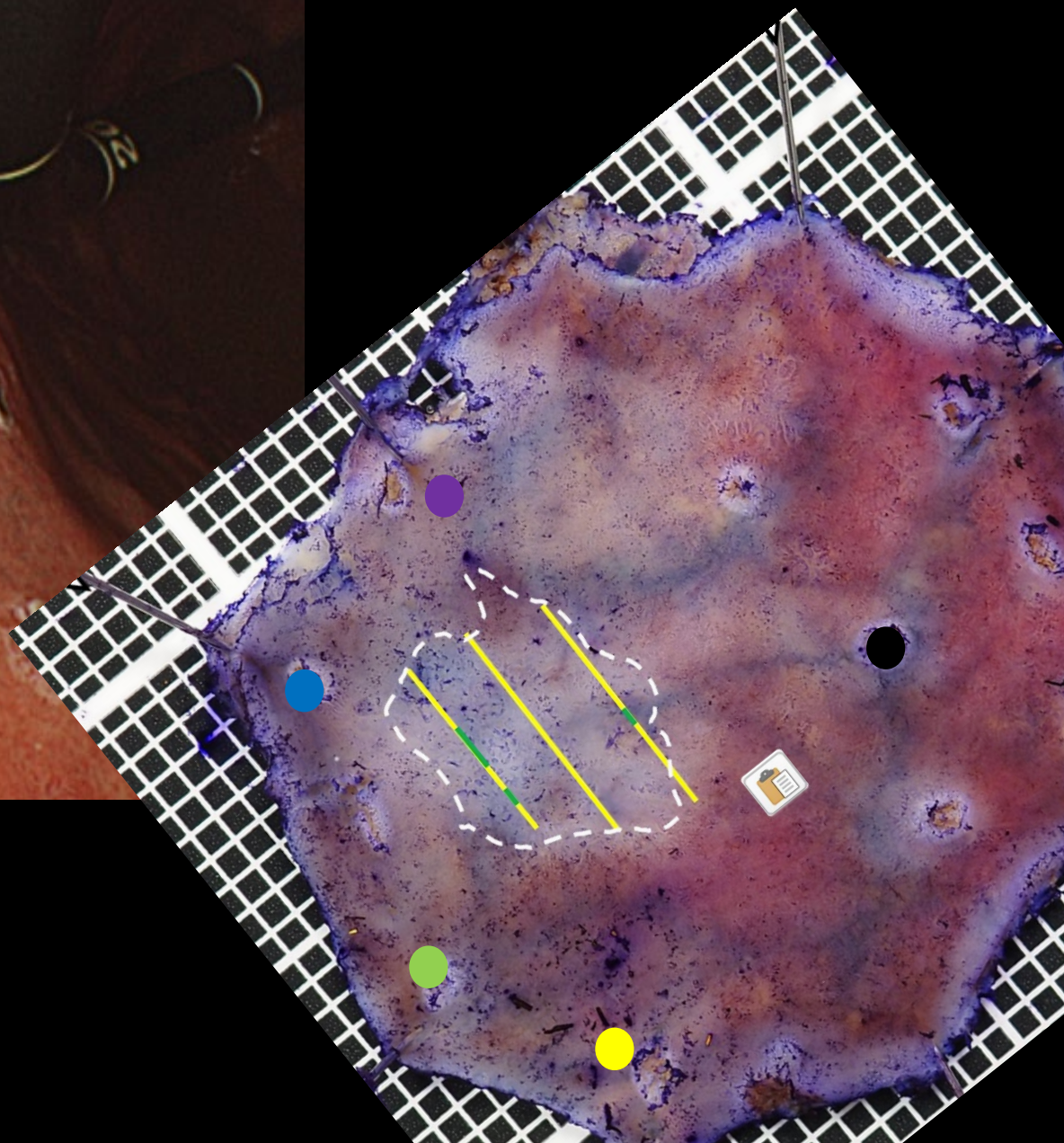
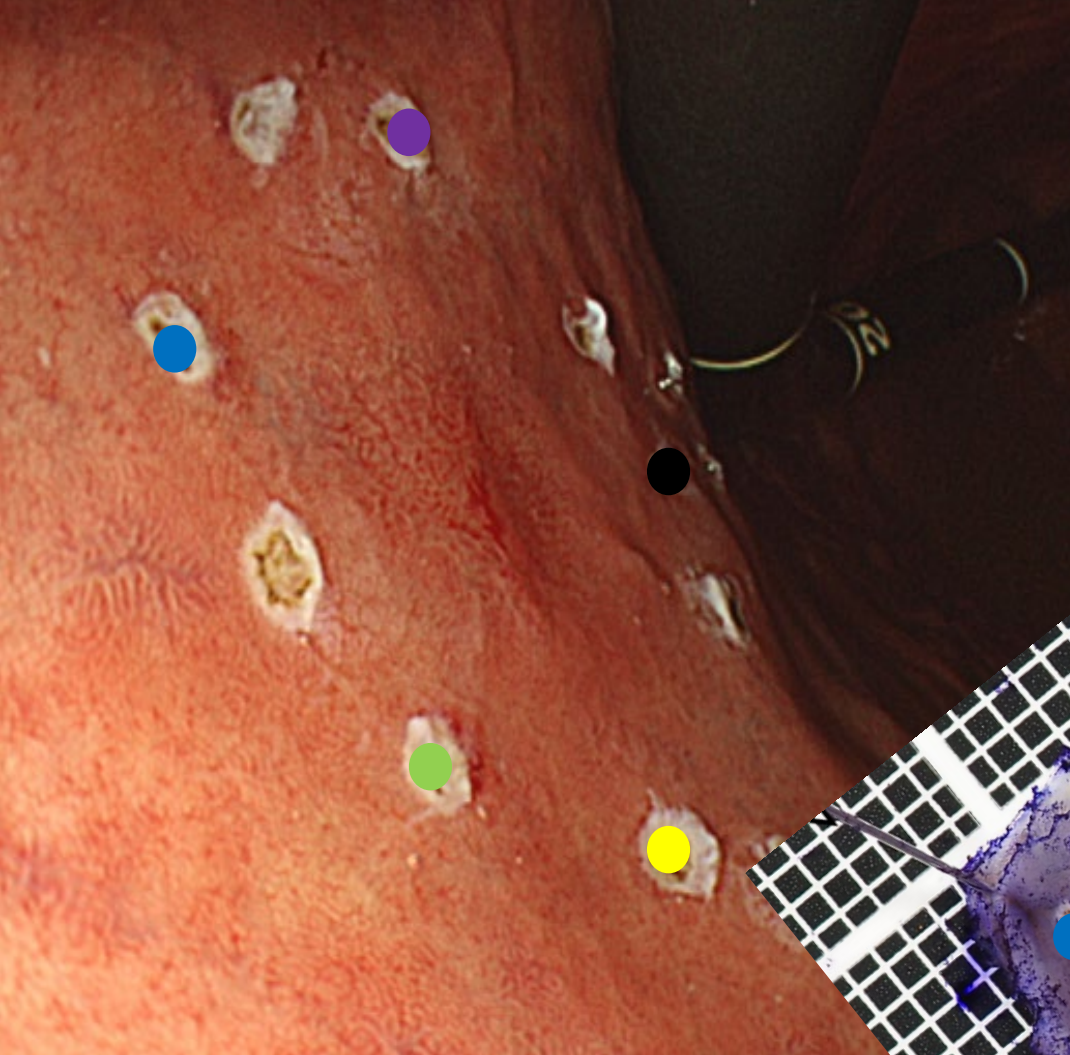
肛門側

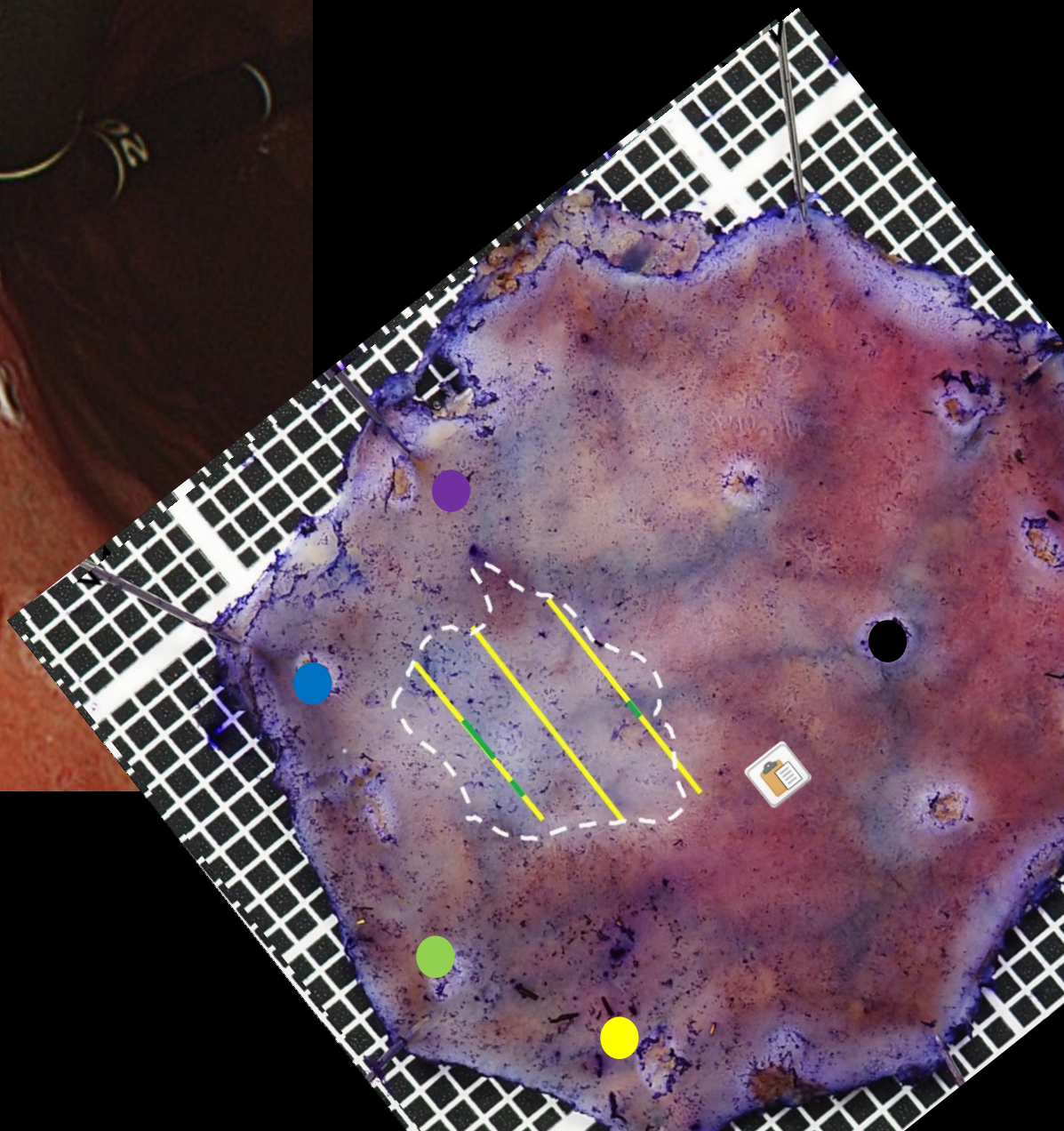
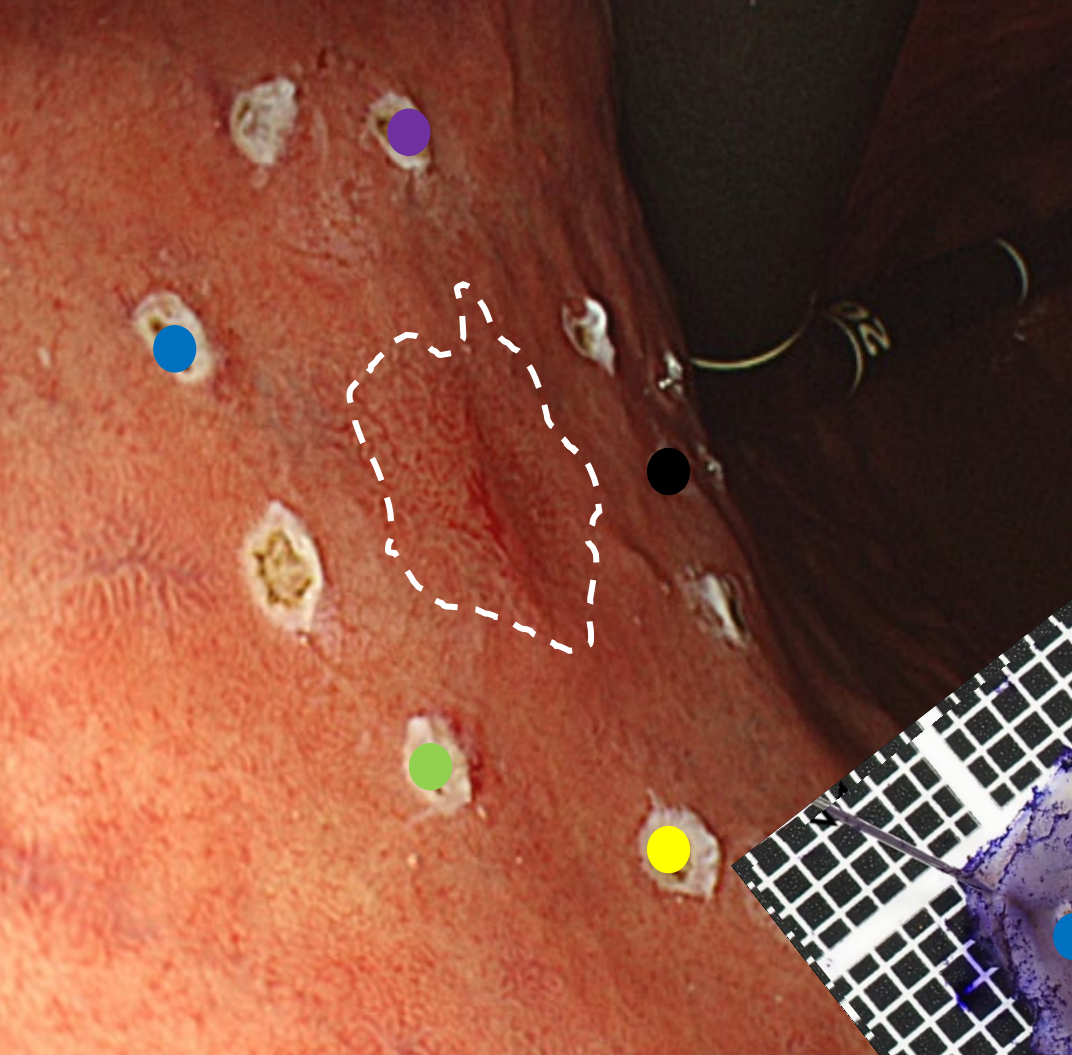


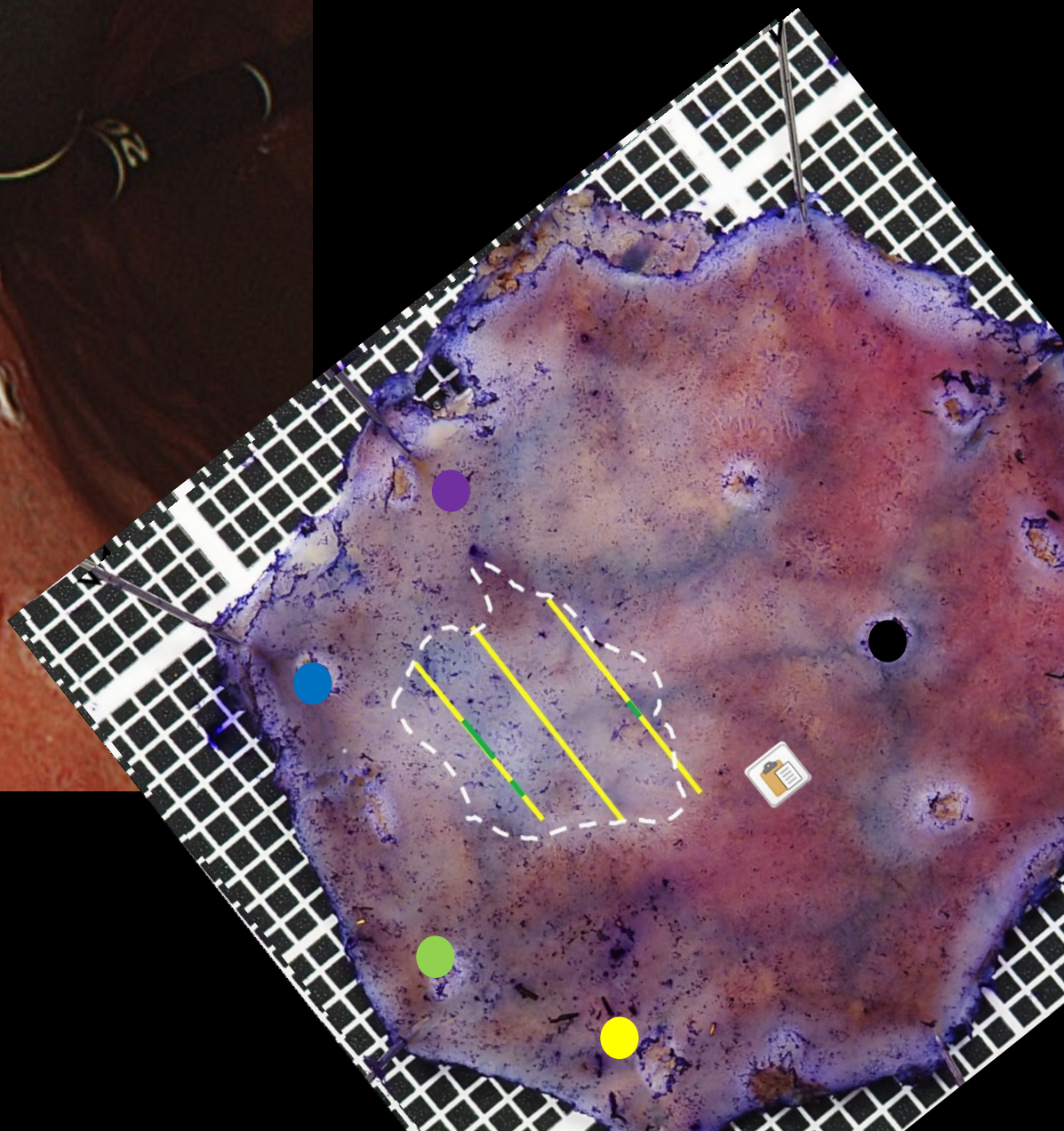
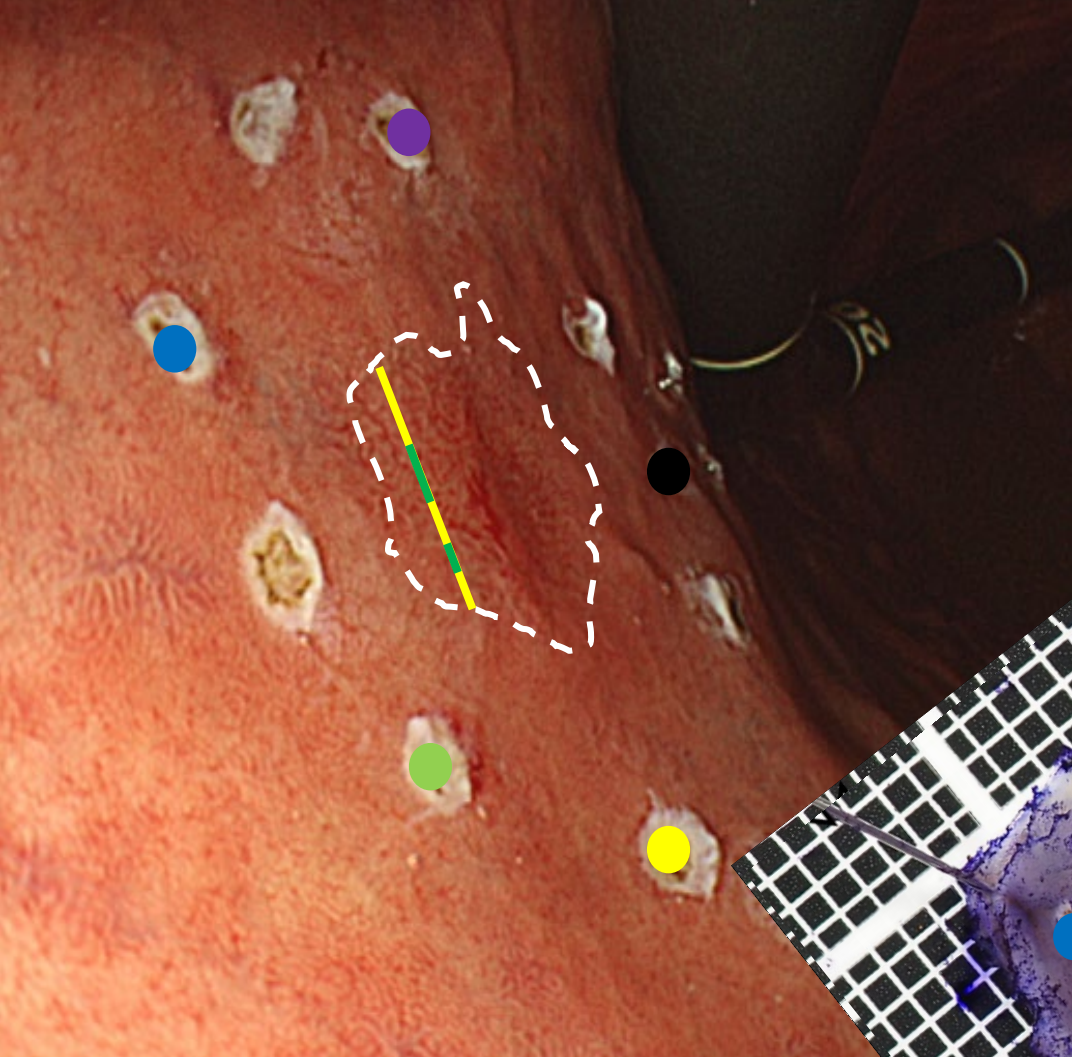
口側

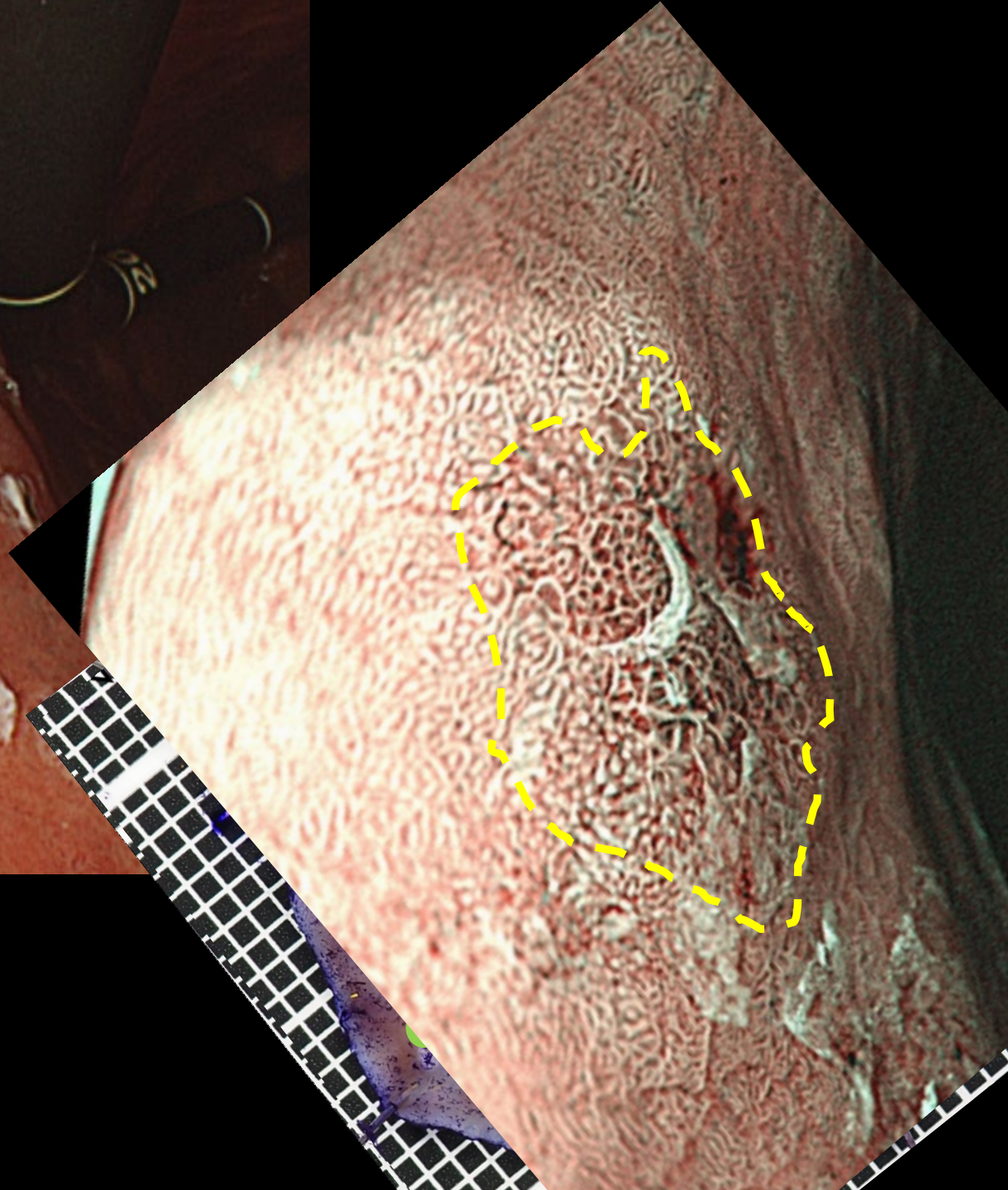
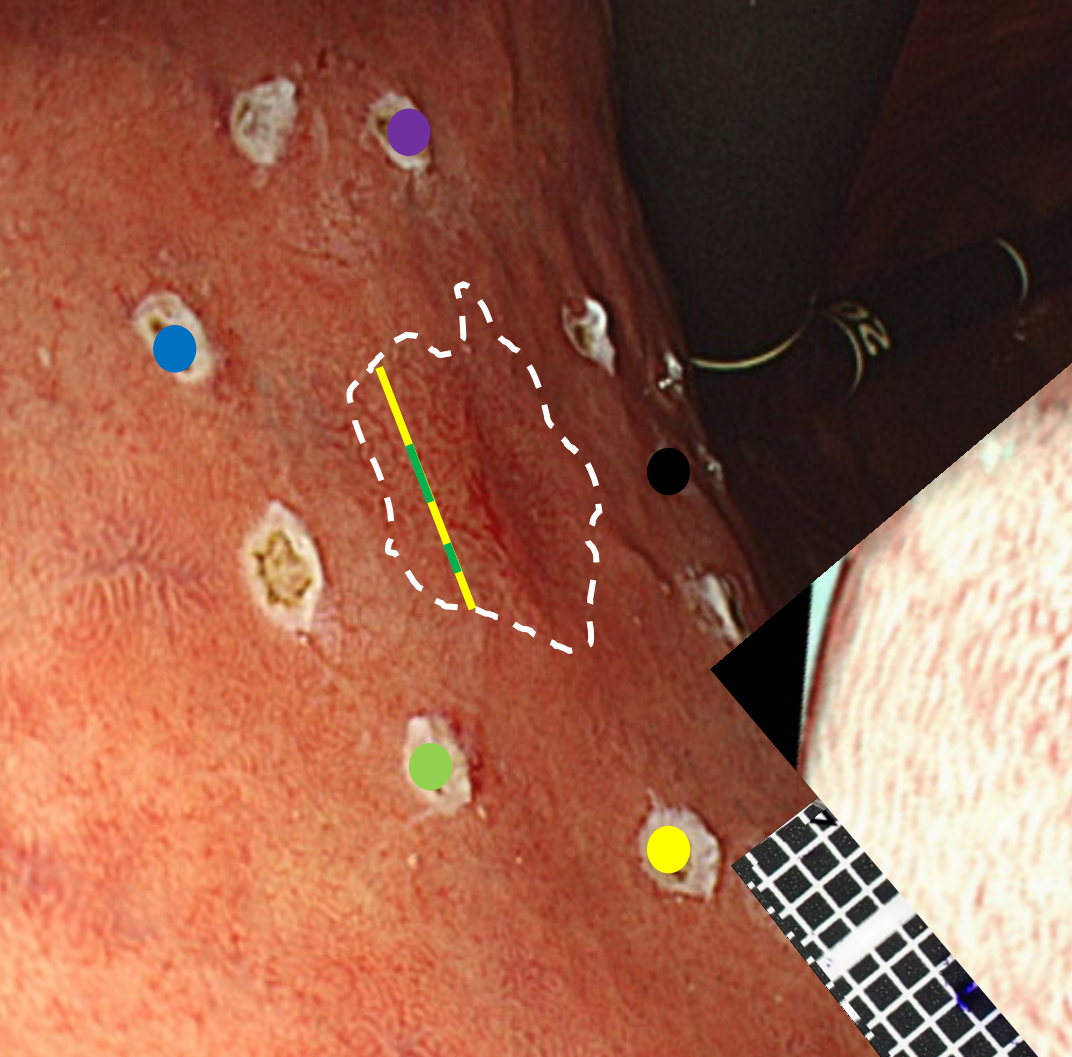
tub1
tub2

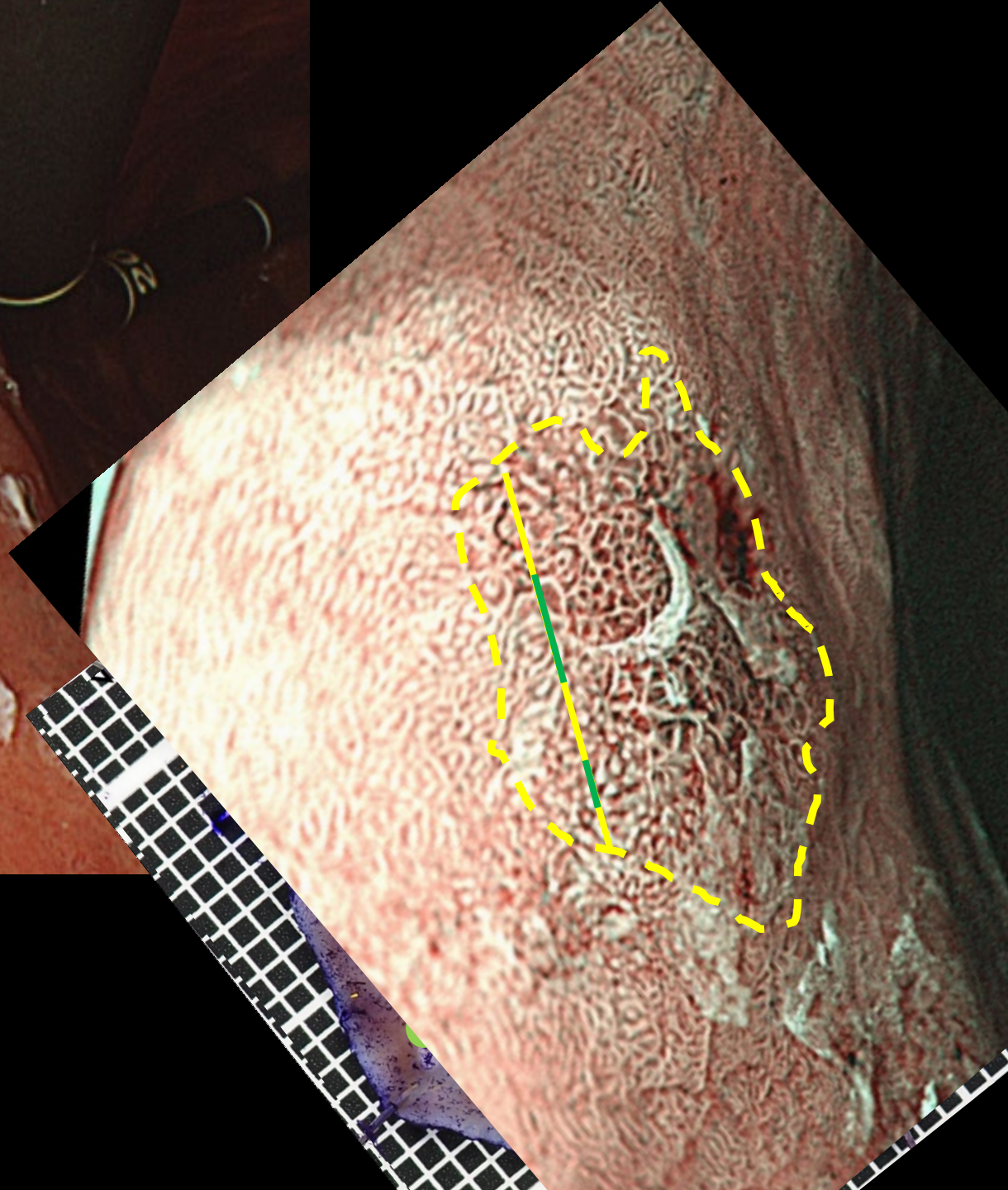
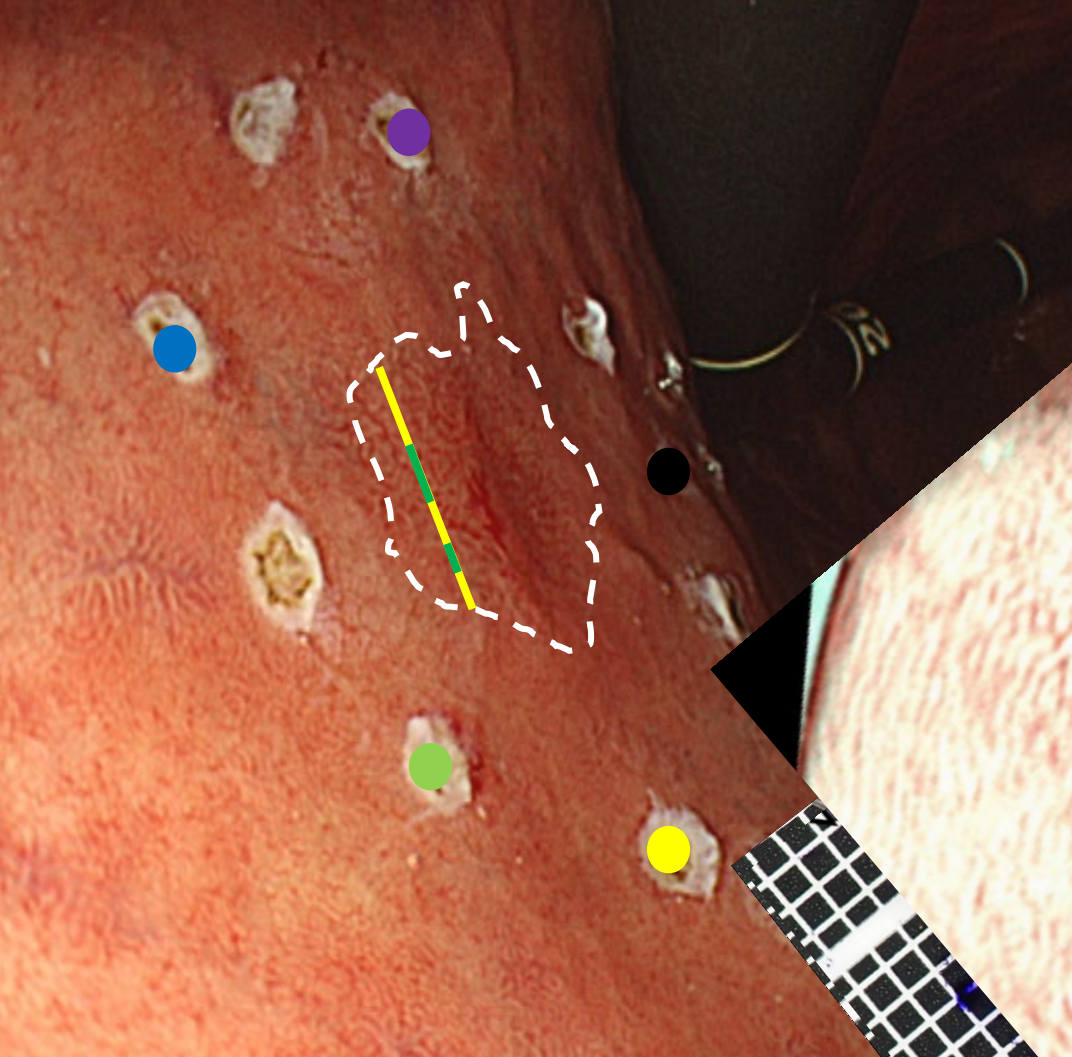


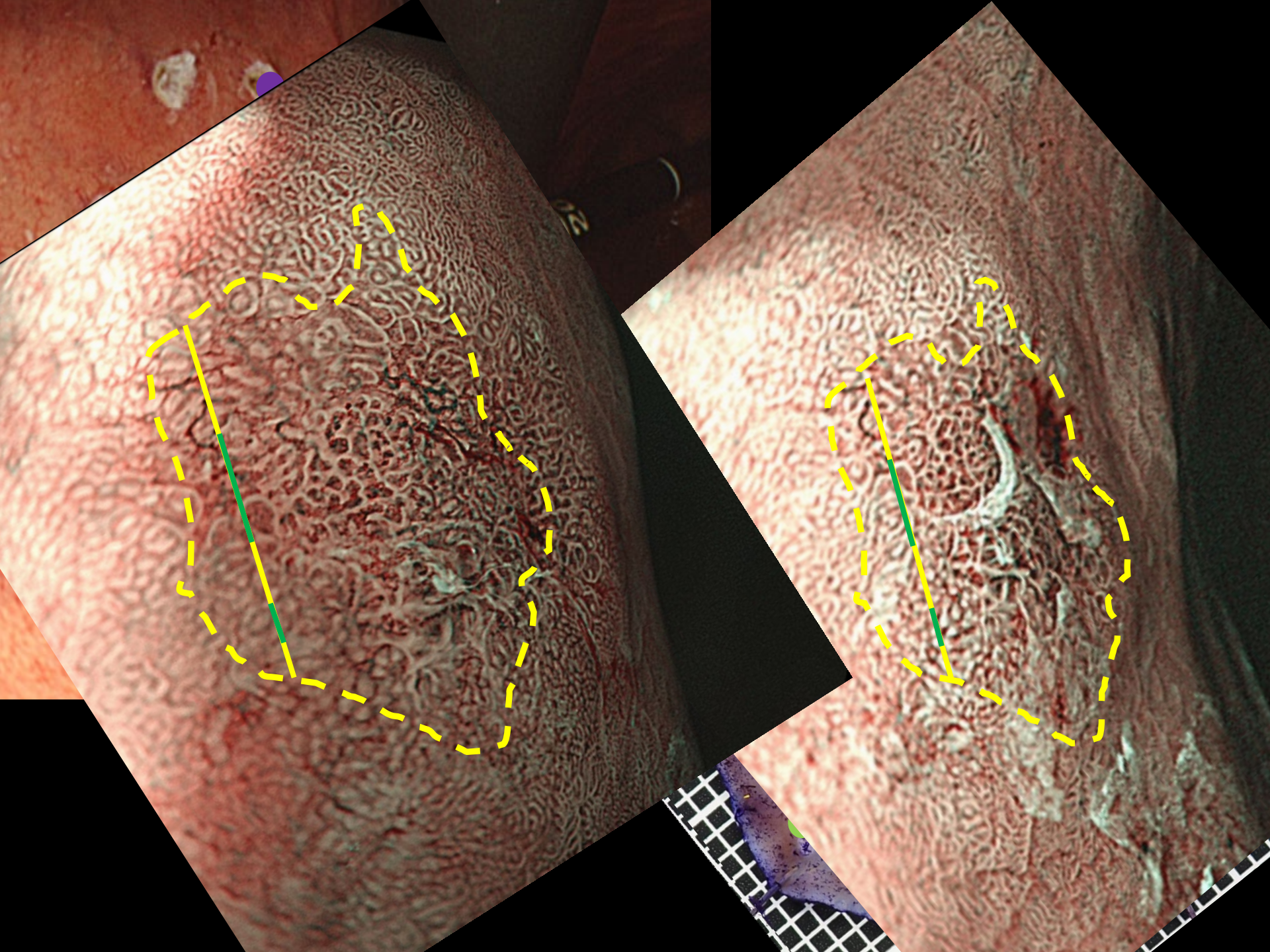






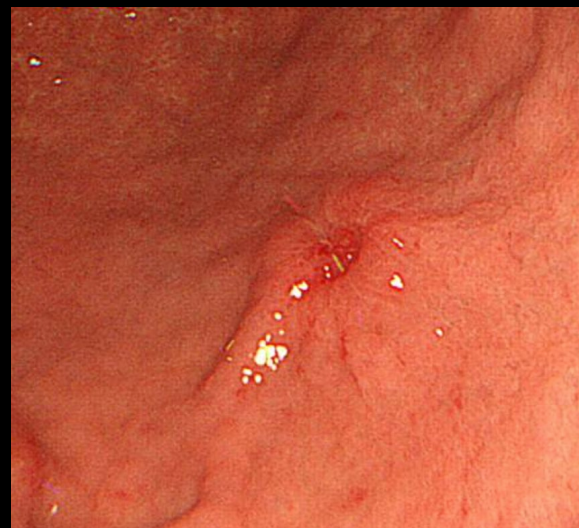






陥凹病変のSM浸潤を示唆する所見

- ①陥凹面の発赤
- ②陥凹面の厚み
- ③壁の硬化像
- ④病変の大きさ>2cm
- ⑤集中する粘膜ひだ先端の癒合
- ⑥辺縁の隆起・台状挙上
- ⑦陥凹面の構造不整



微小浸潤はその限りではない

★本症例のように10mm以下でM癌と診断したものでly1となることは珍しい