

消化管 mapping

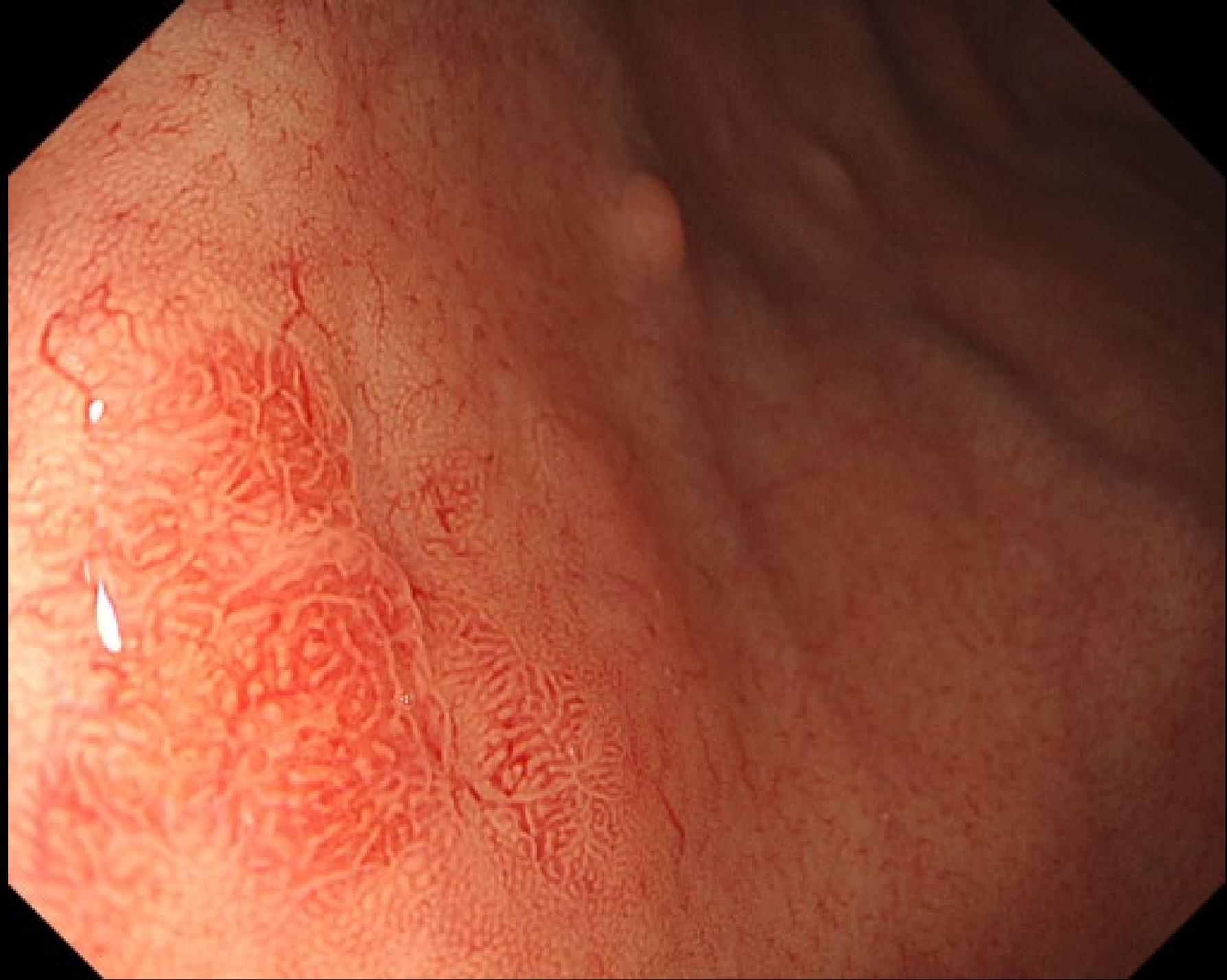
胃

発表: 大川 悟史

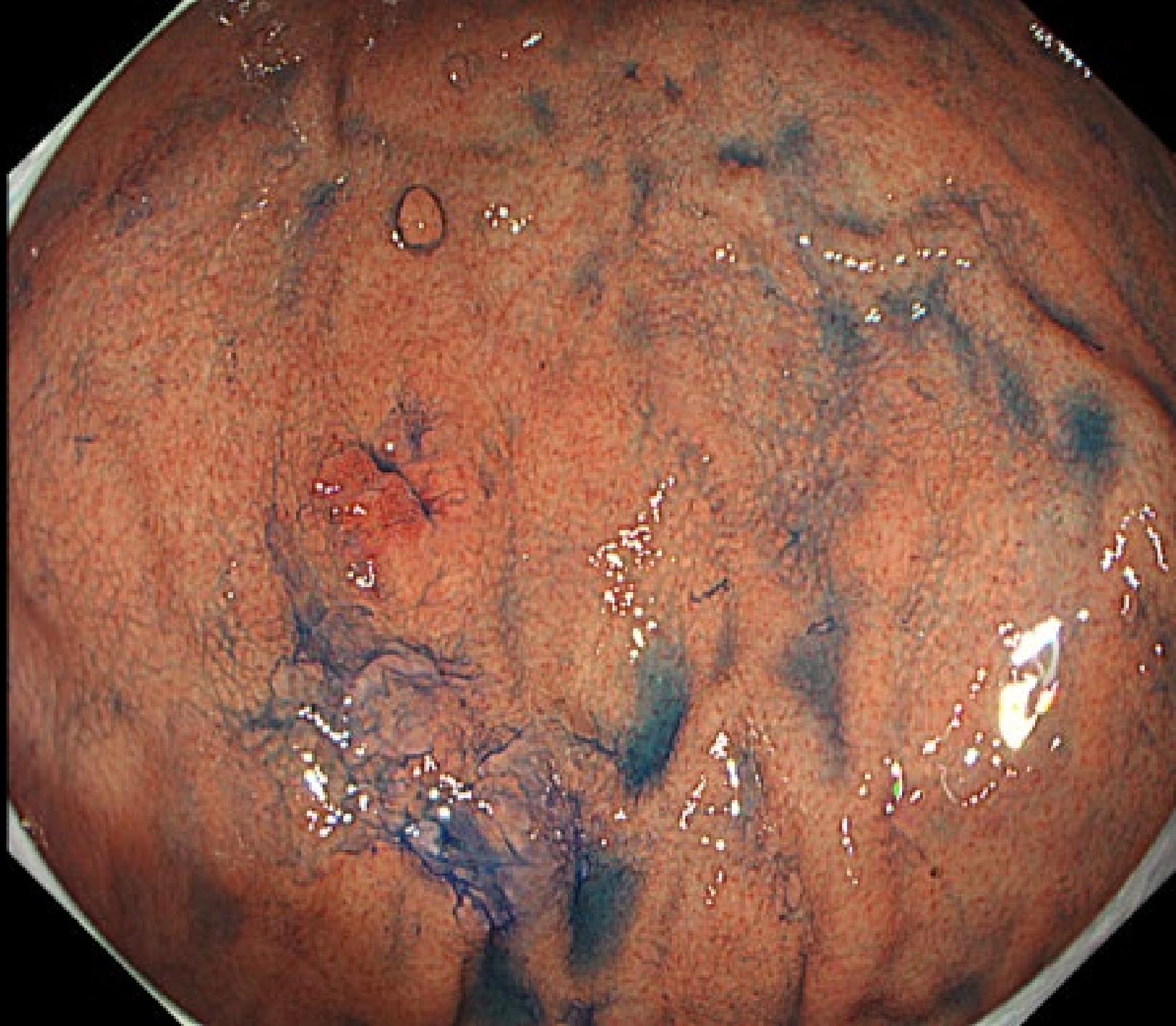
通常觀察 3枚

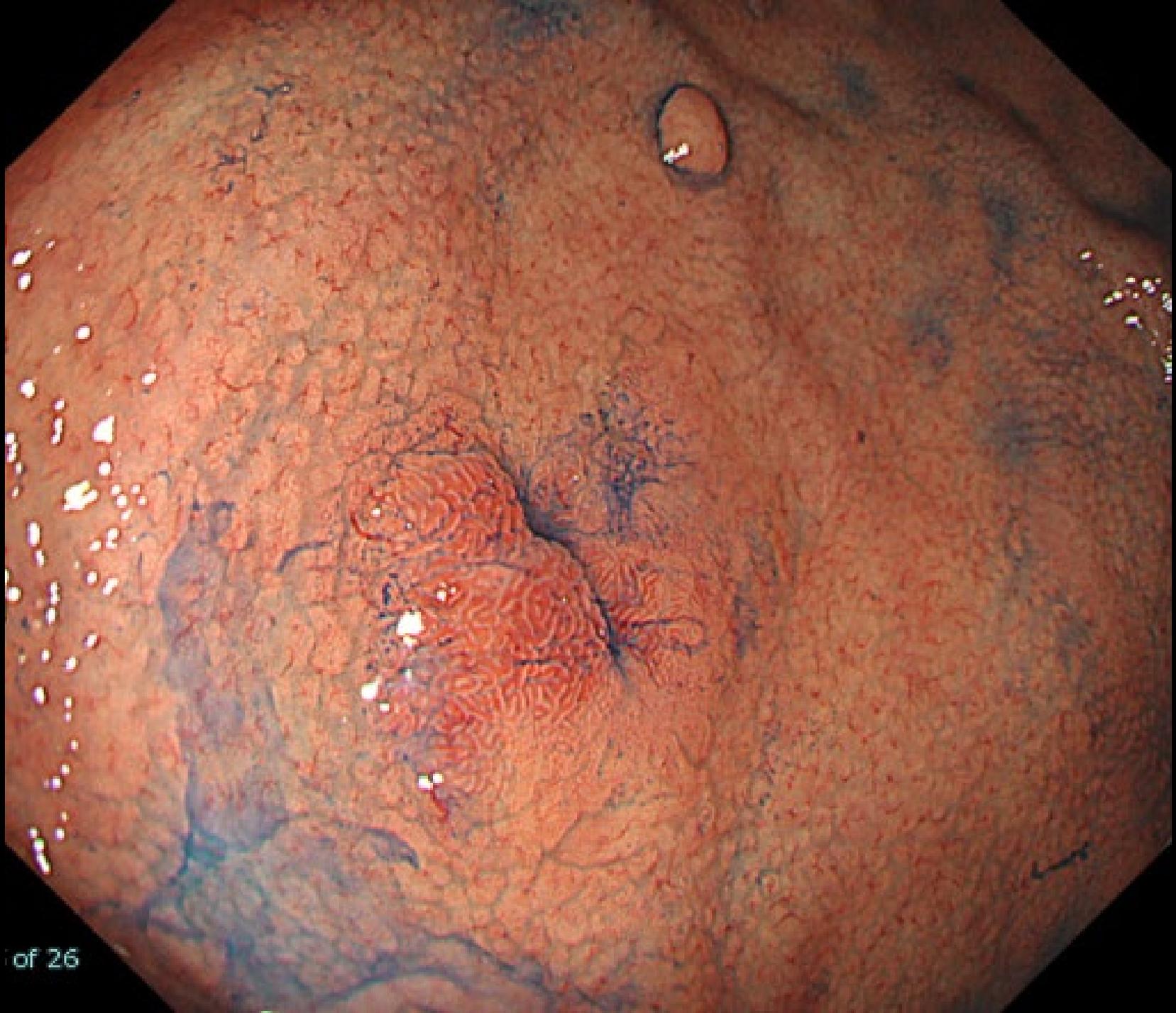


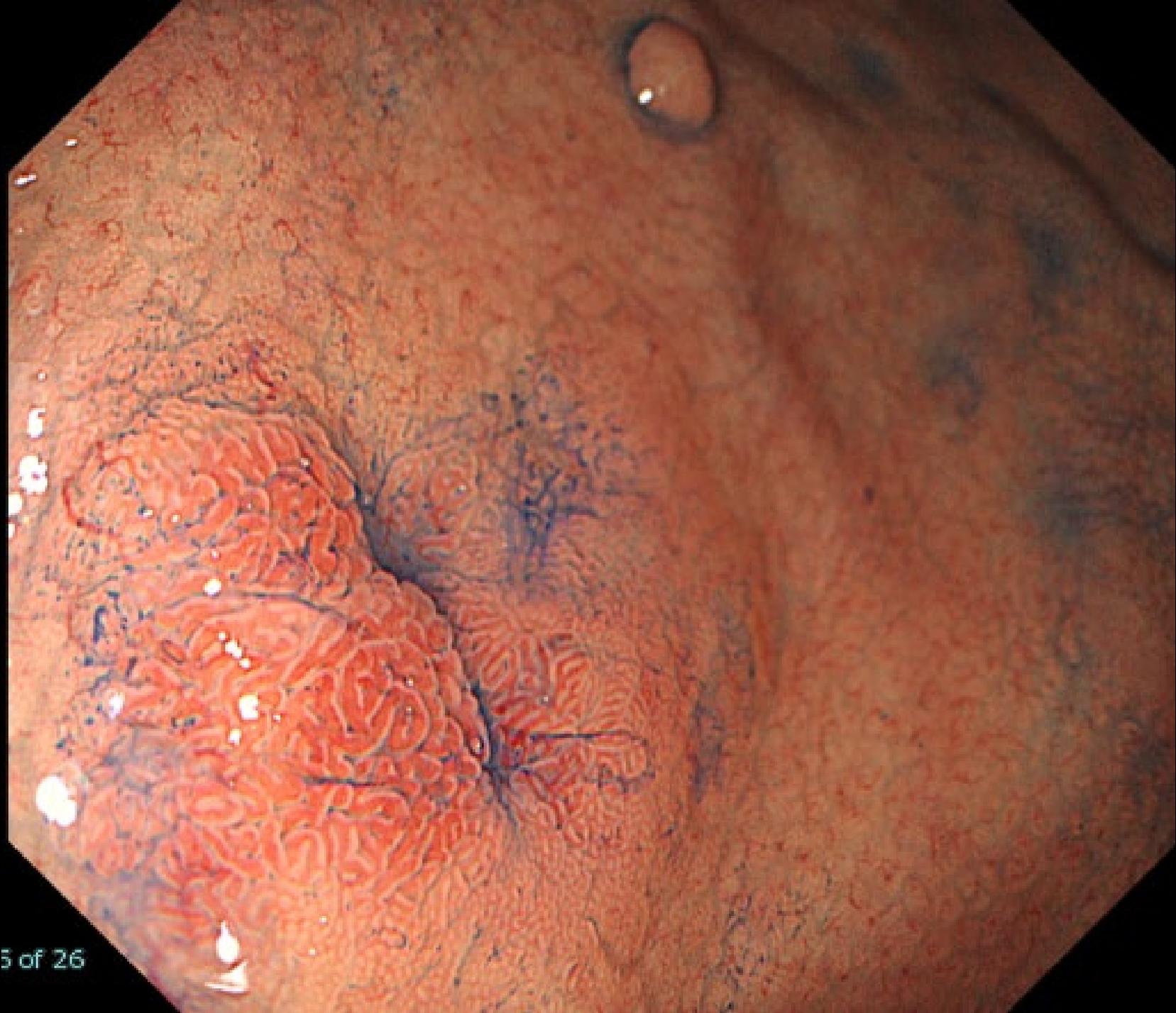




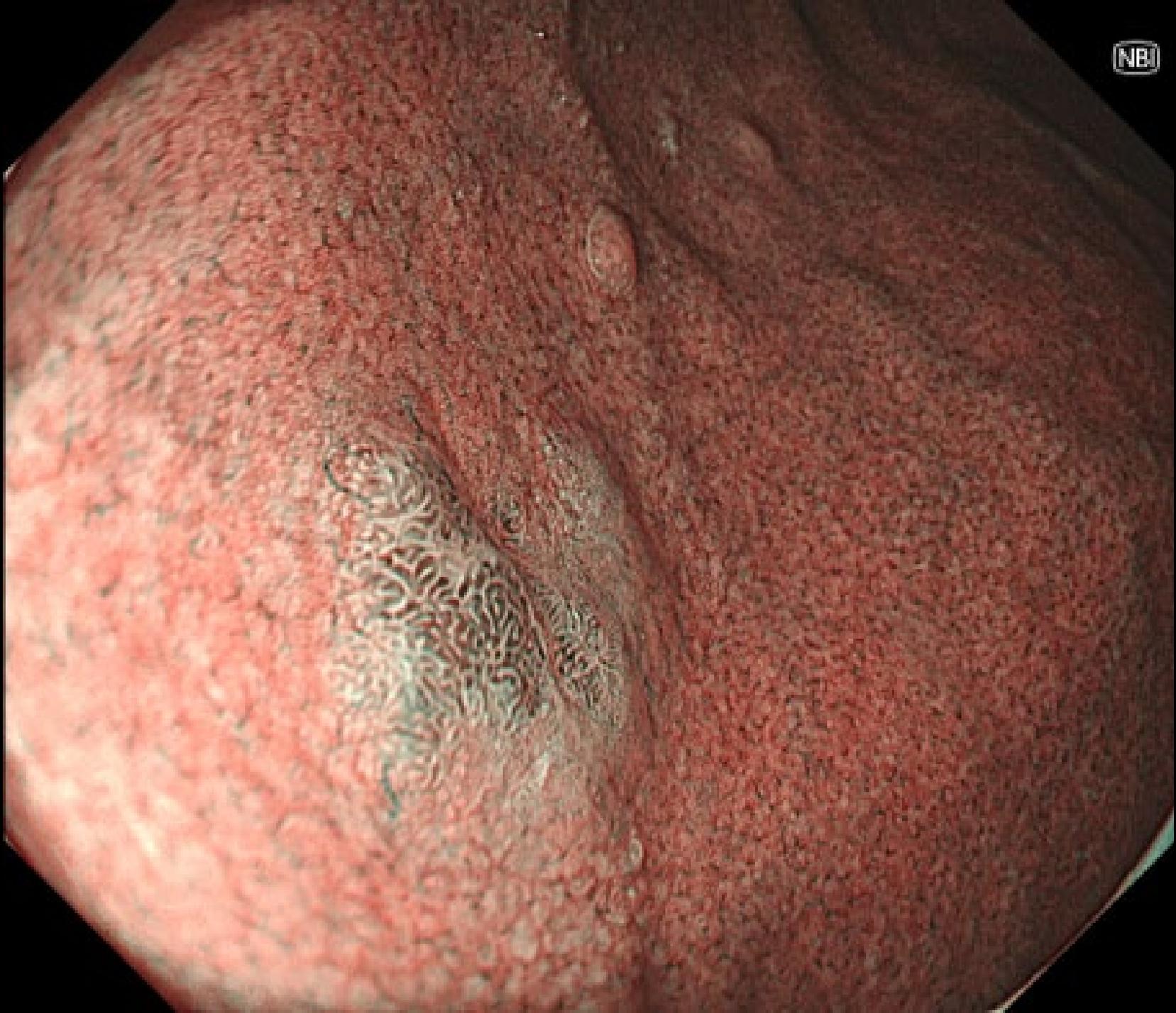
インジゴ散布観察 3枚

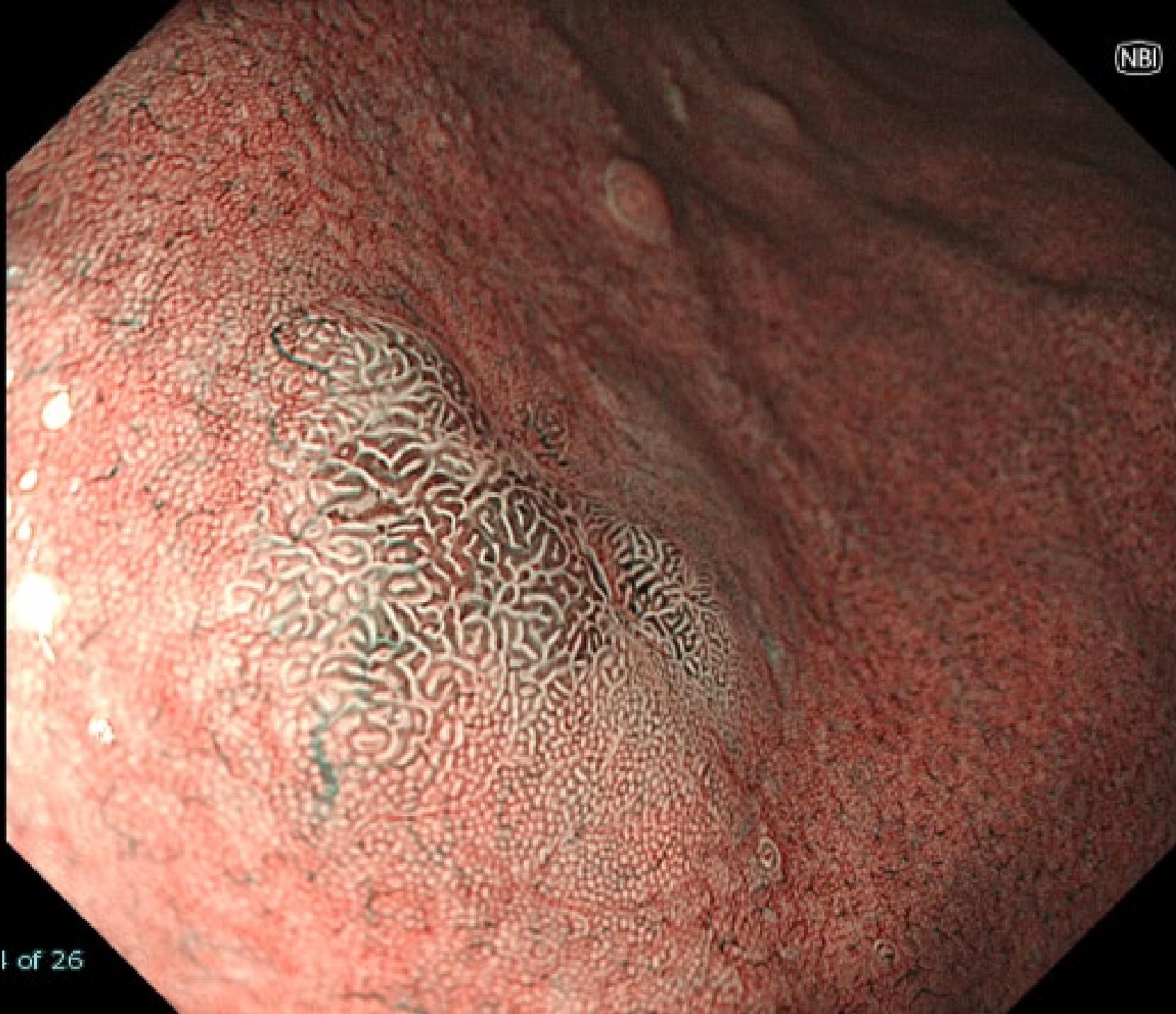


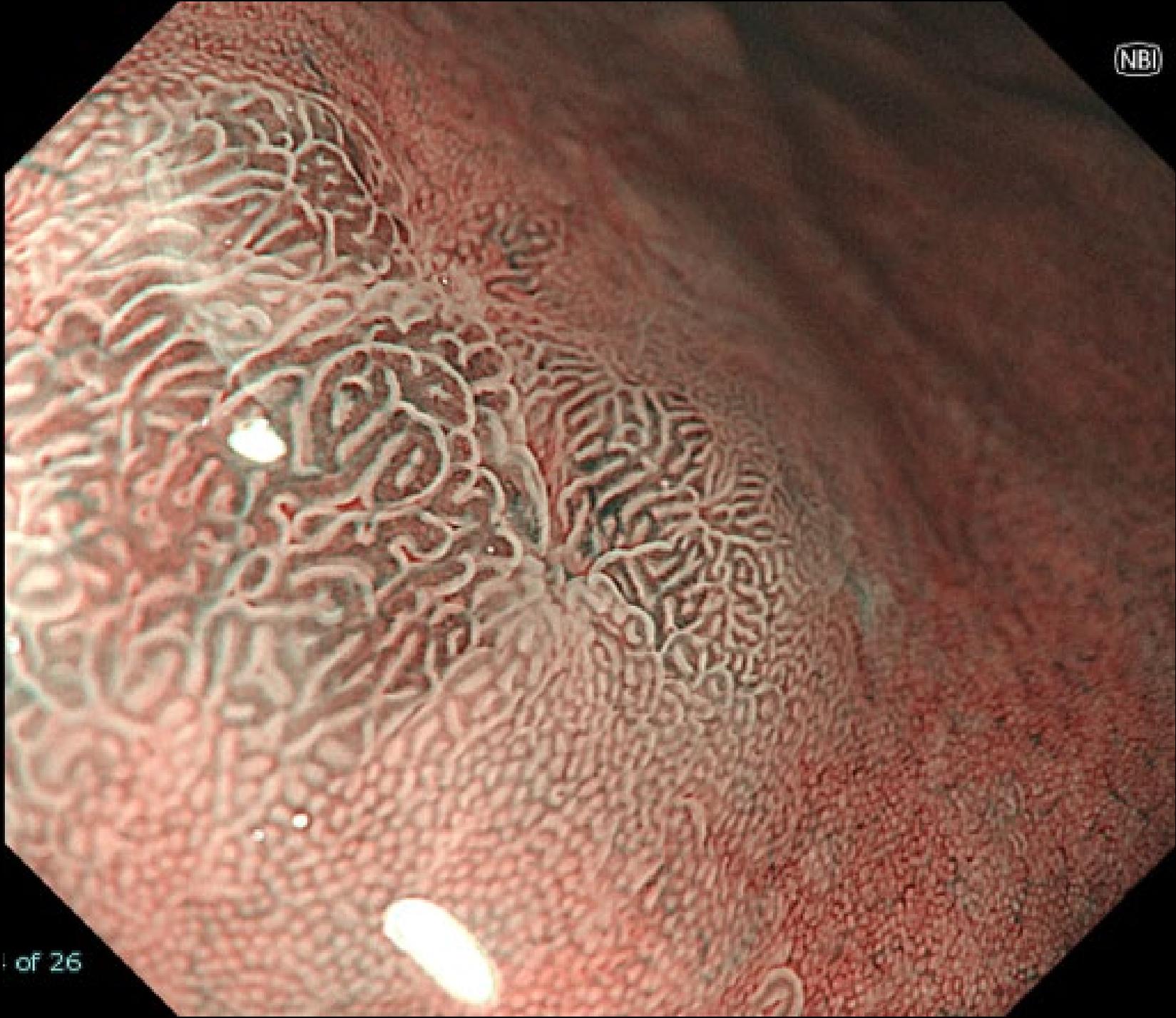


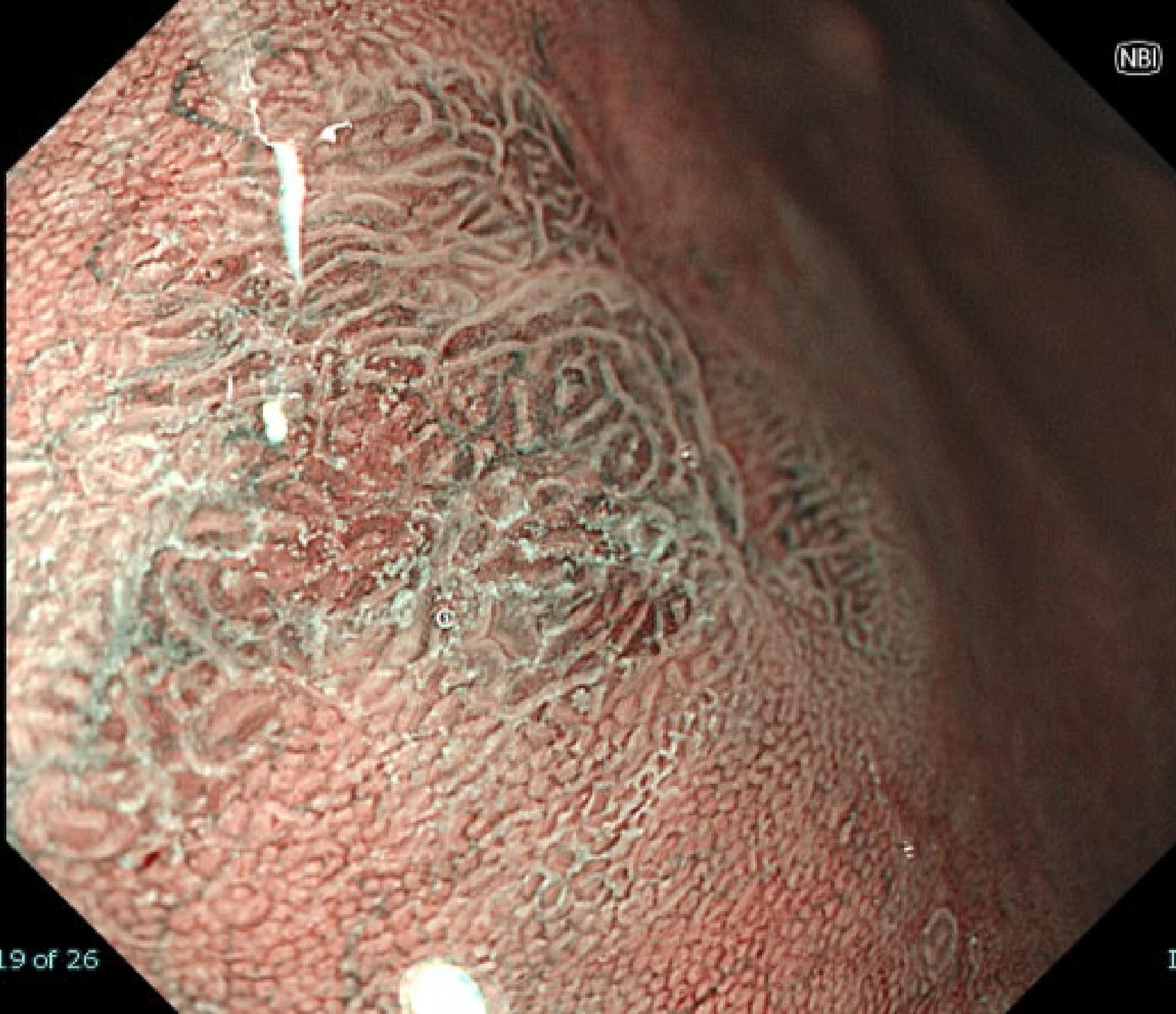


NBI觀察 7枚



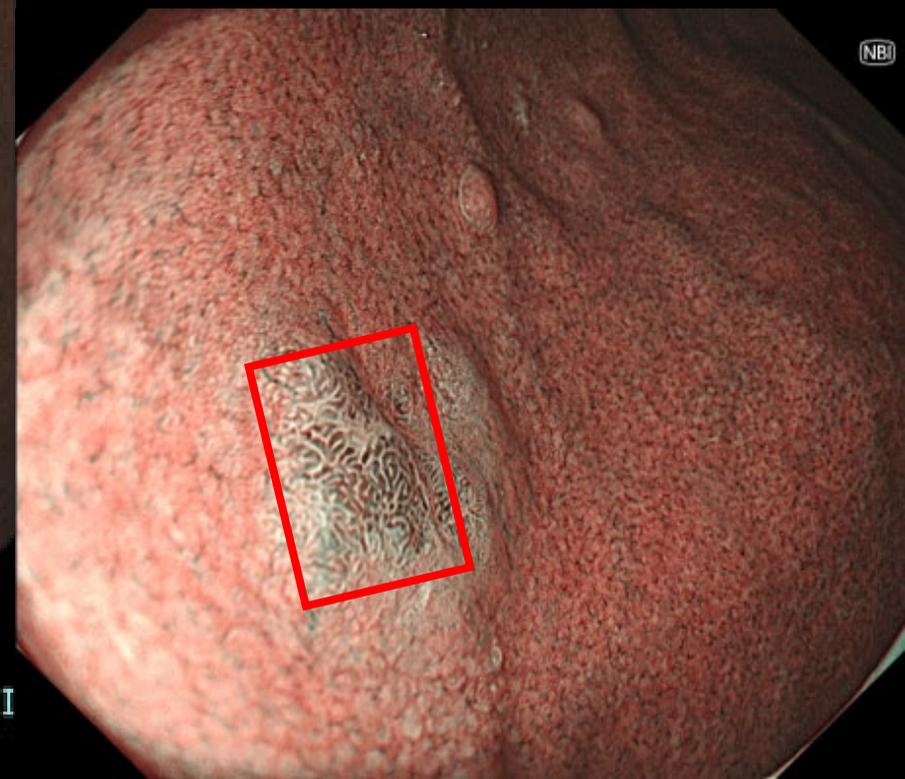




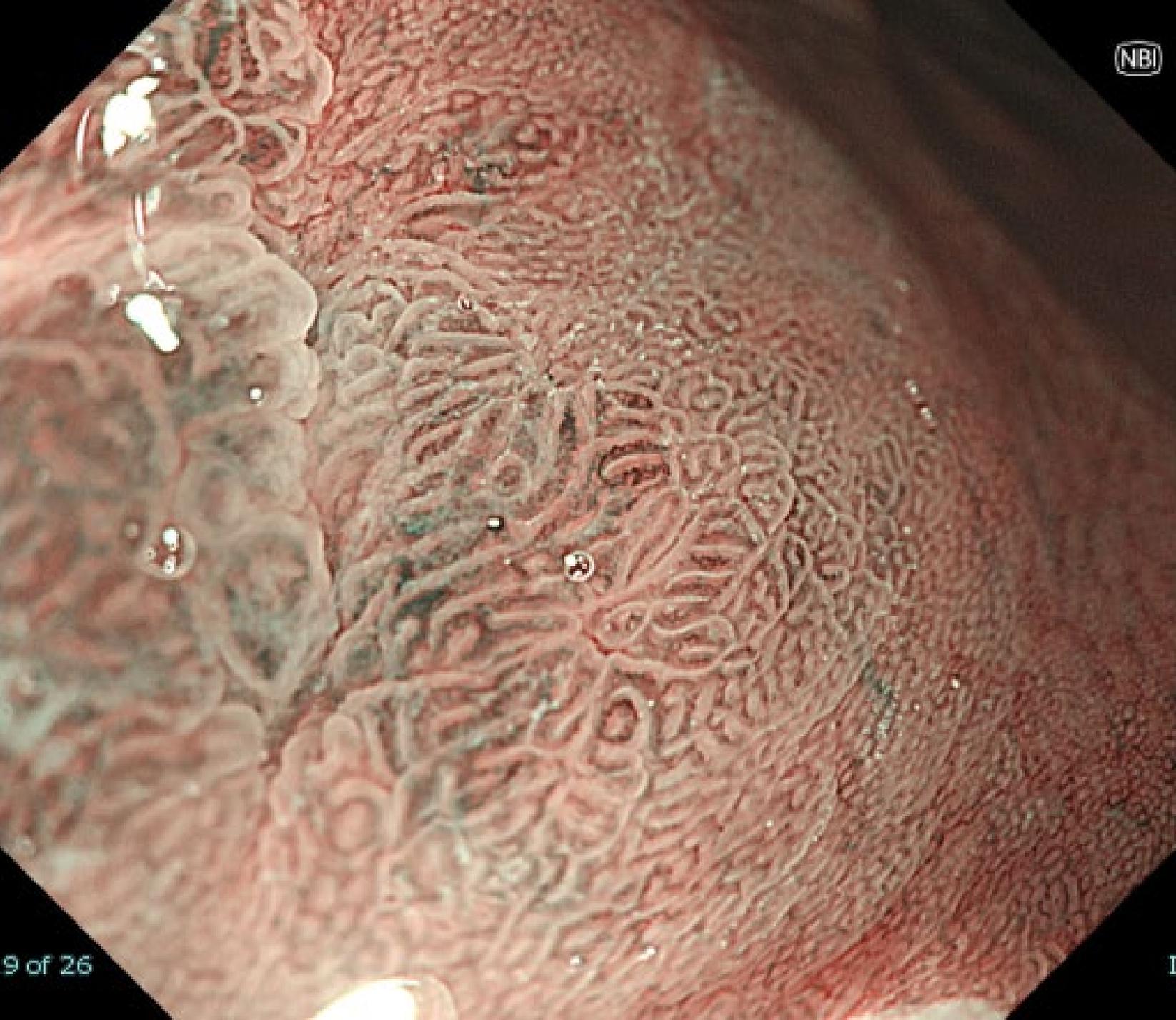


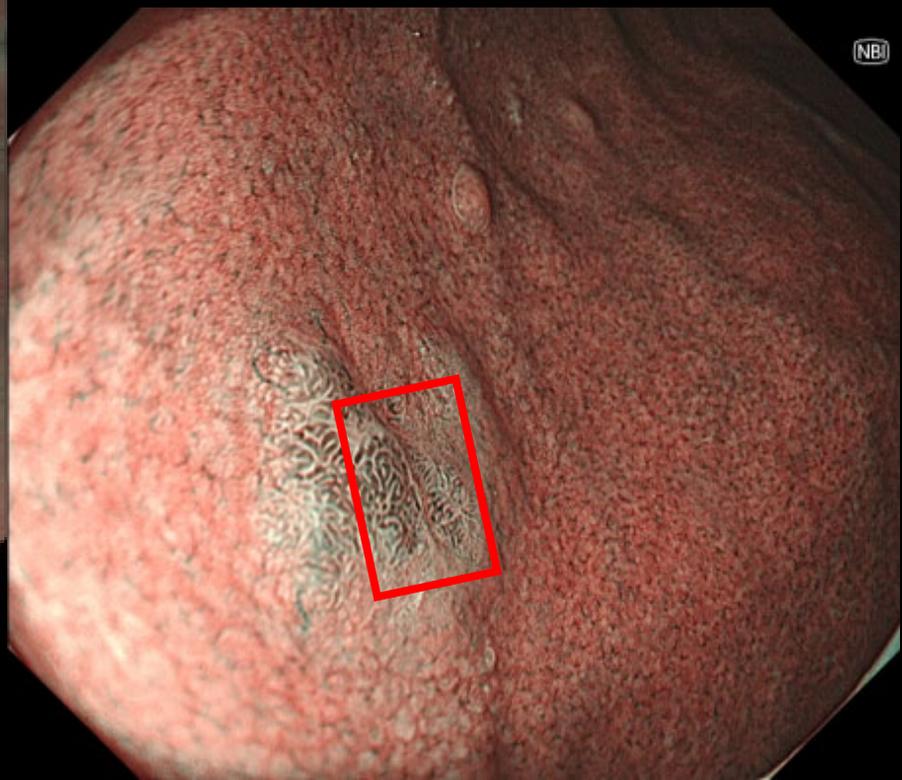
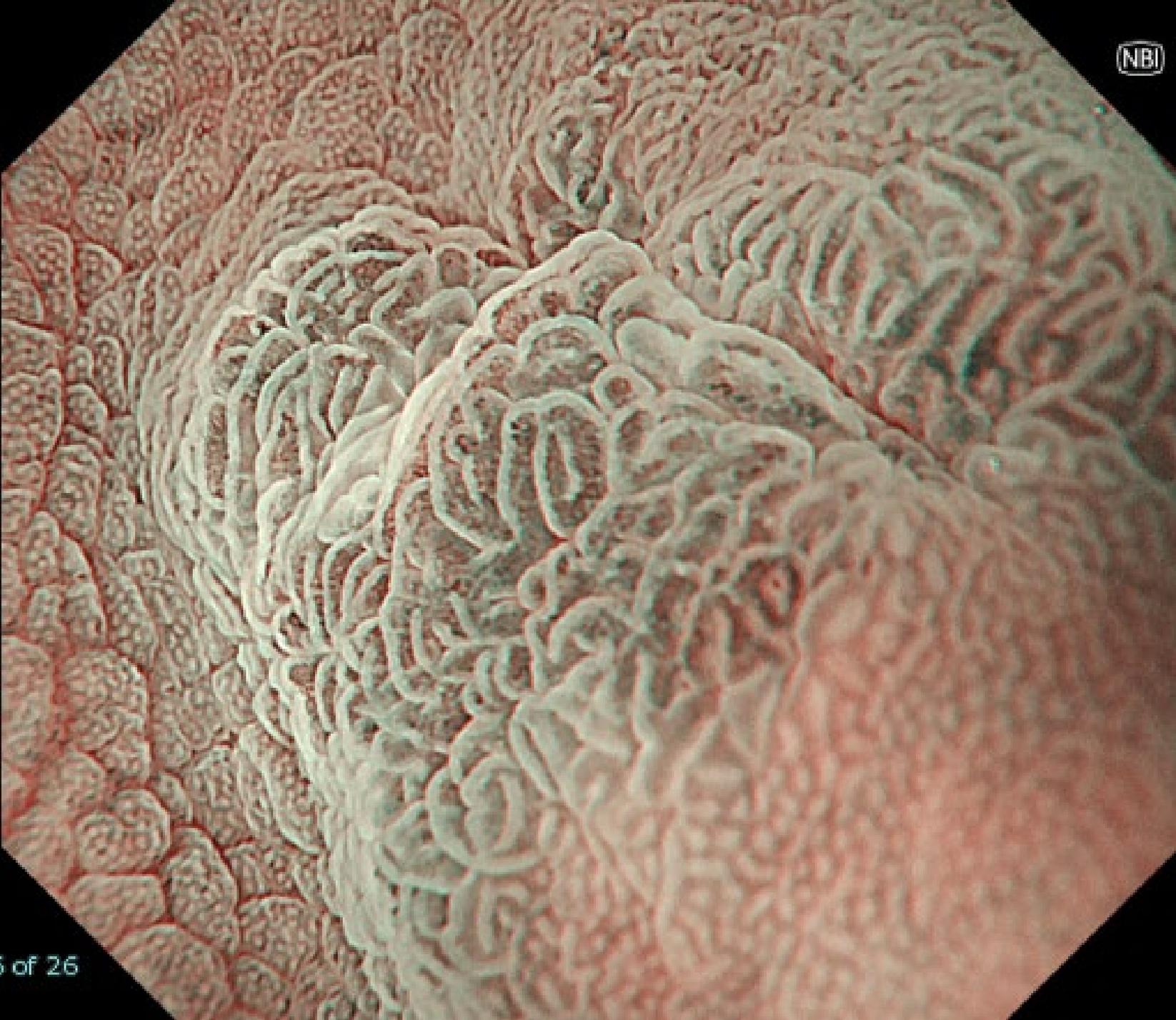
(NBI)

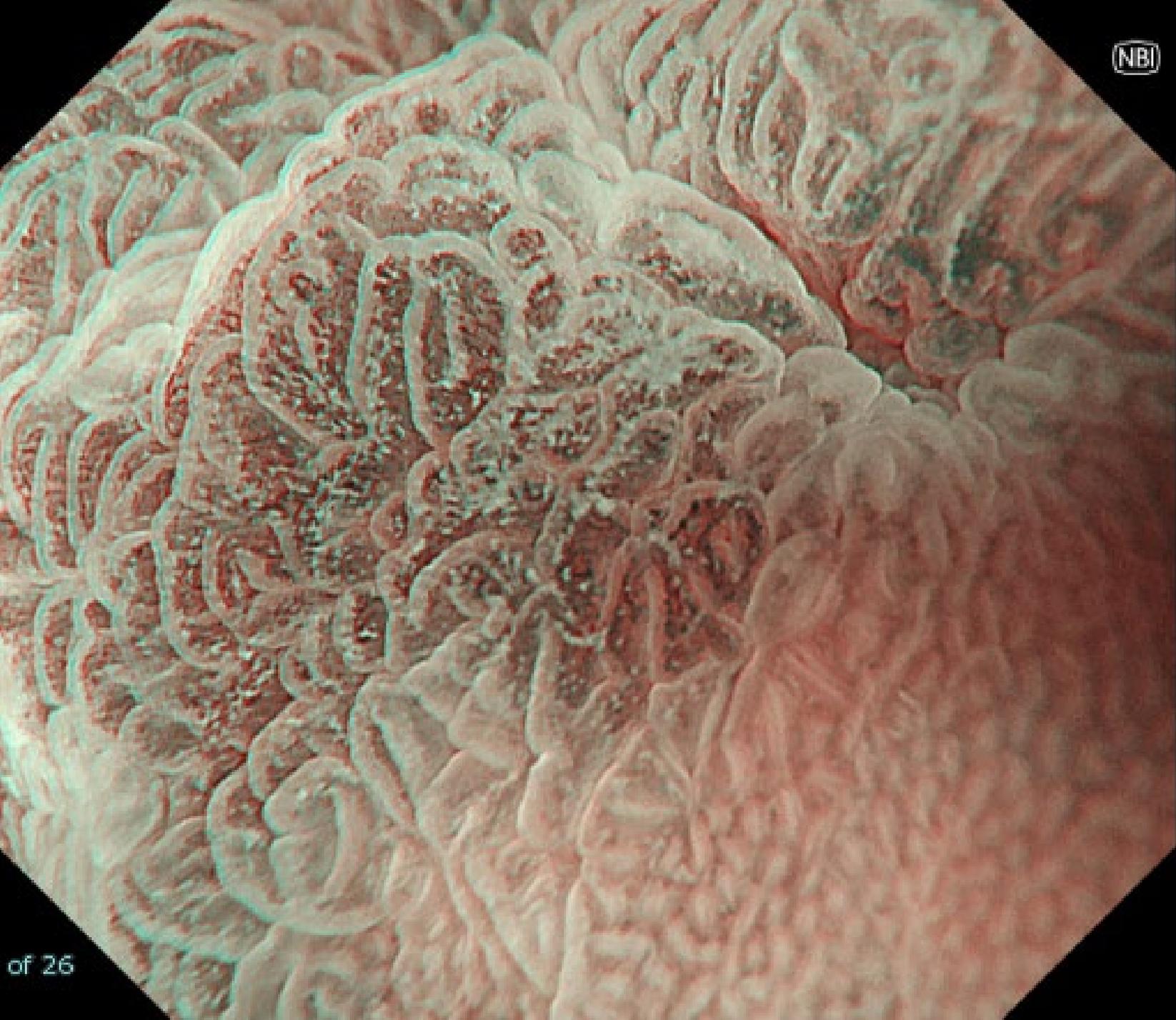
I



(NBI)







内視鏡診断

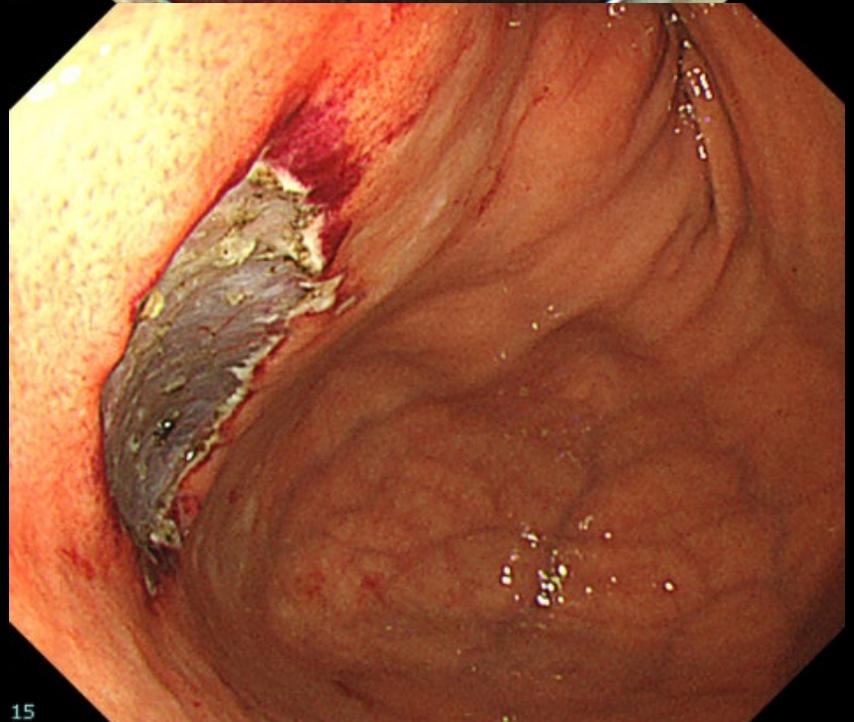
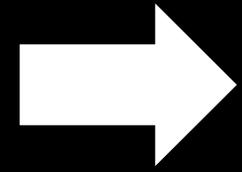
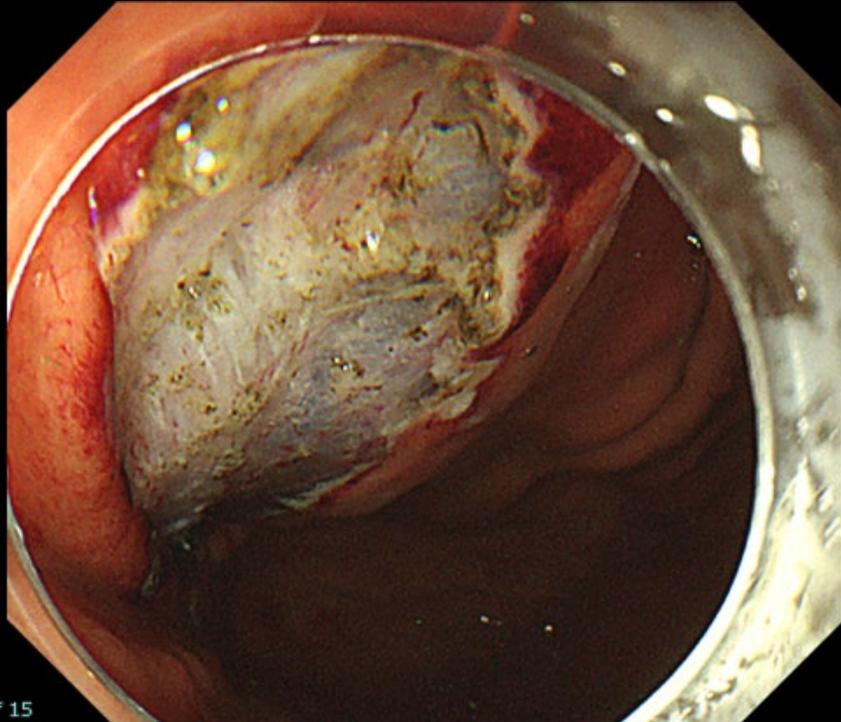
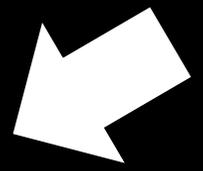
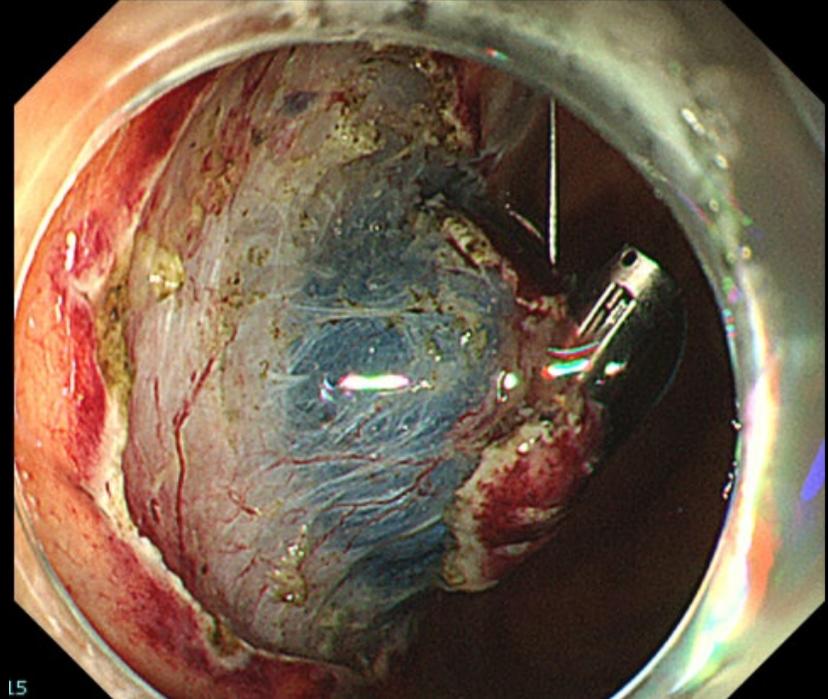
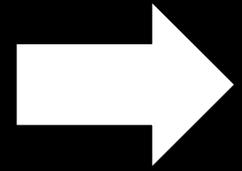
早期胃癌(穹隆部後壁)

大きさ:10mm 肉眼型 0-II a, 胃底腺粘膜型腺癌

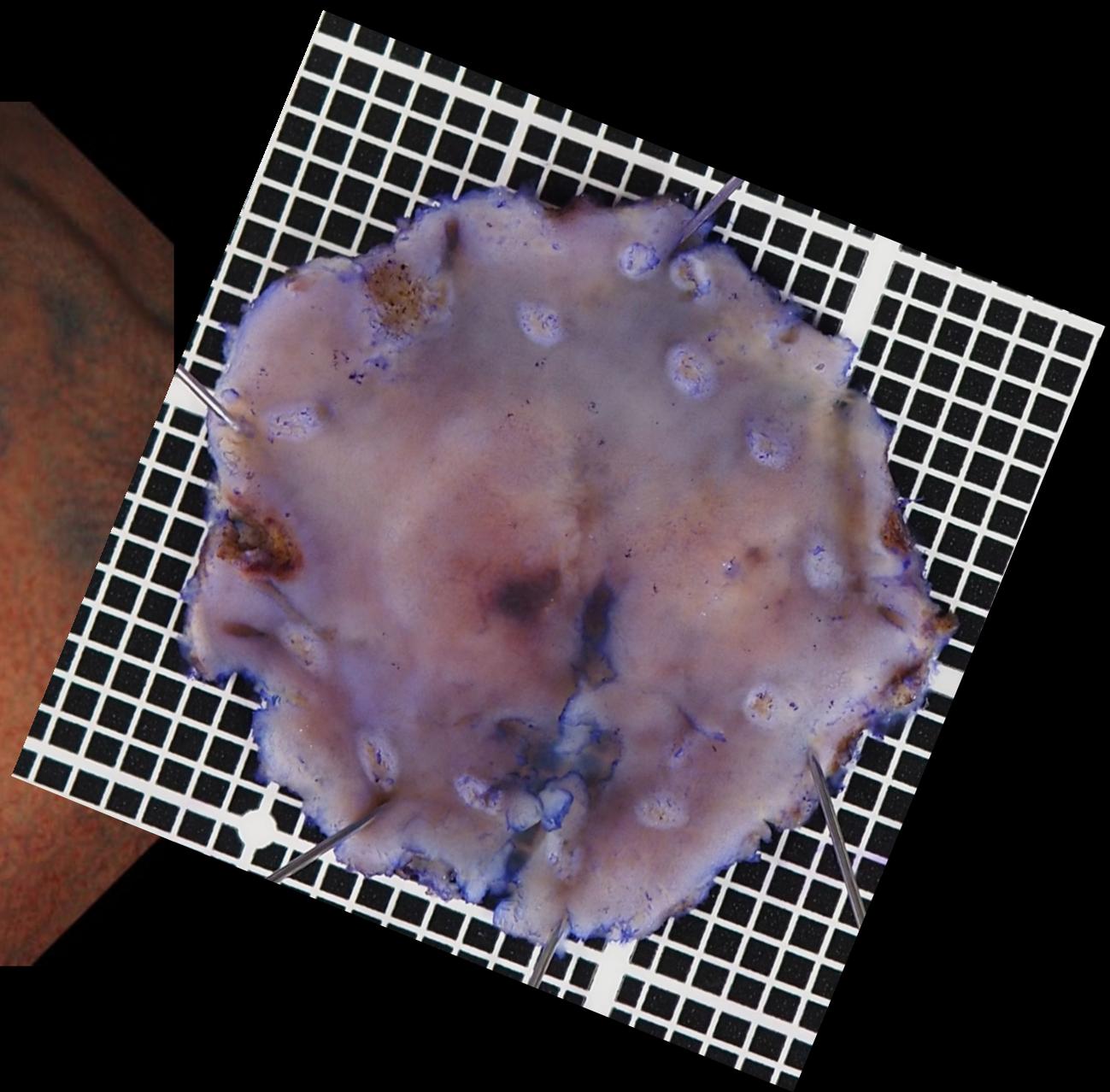
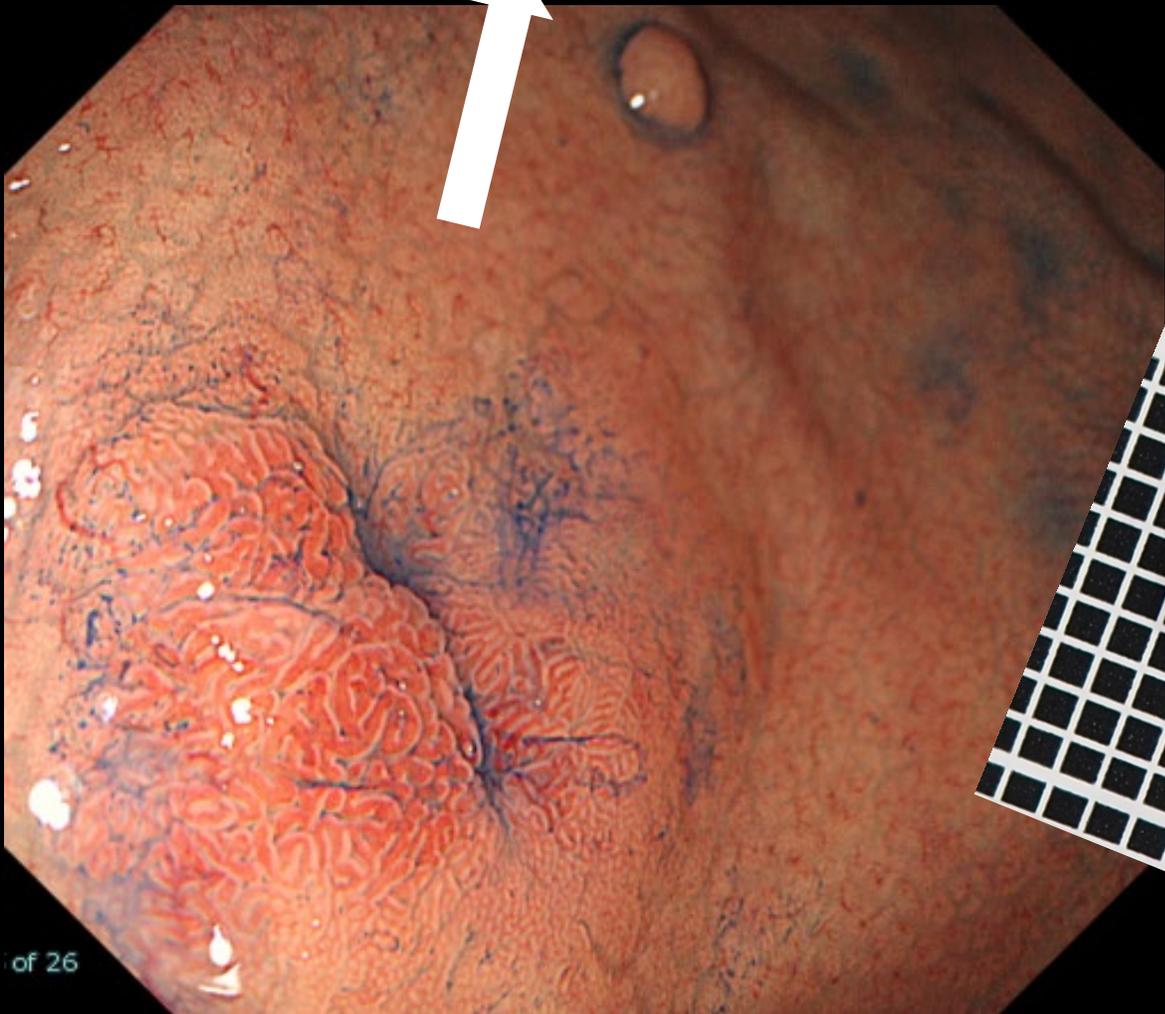
深達度:SM, ULO

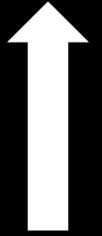
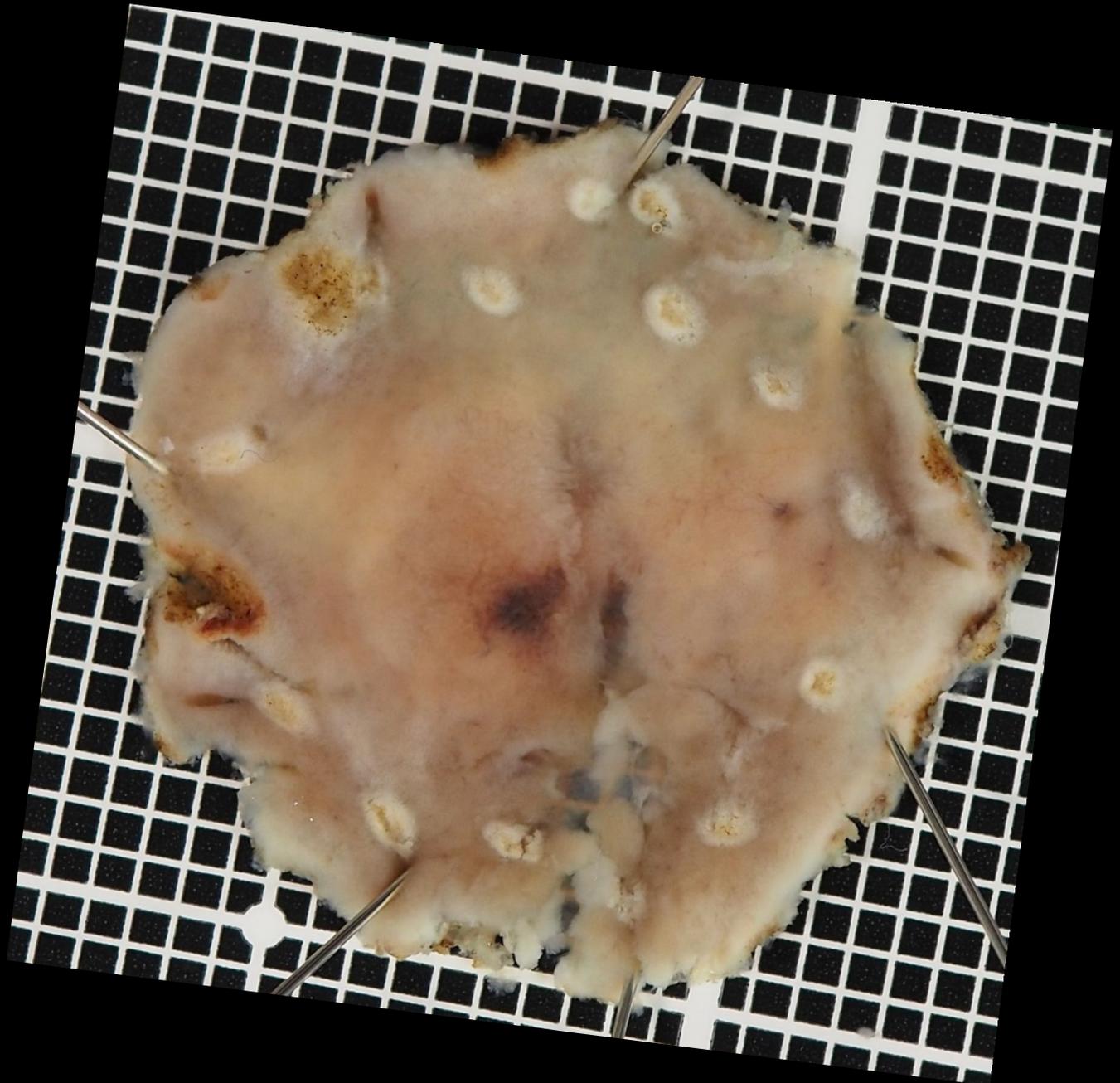
NBI観察:DL(±)IMSP(-)IMVP(+)

ESD

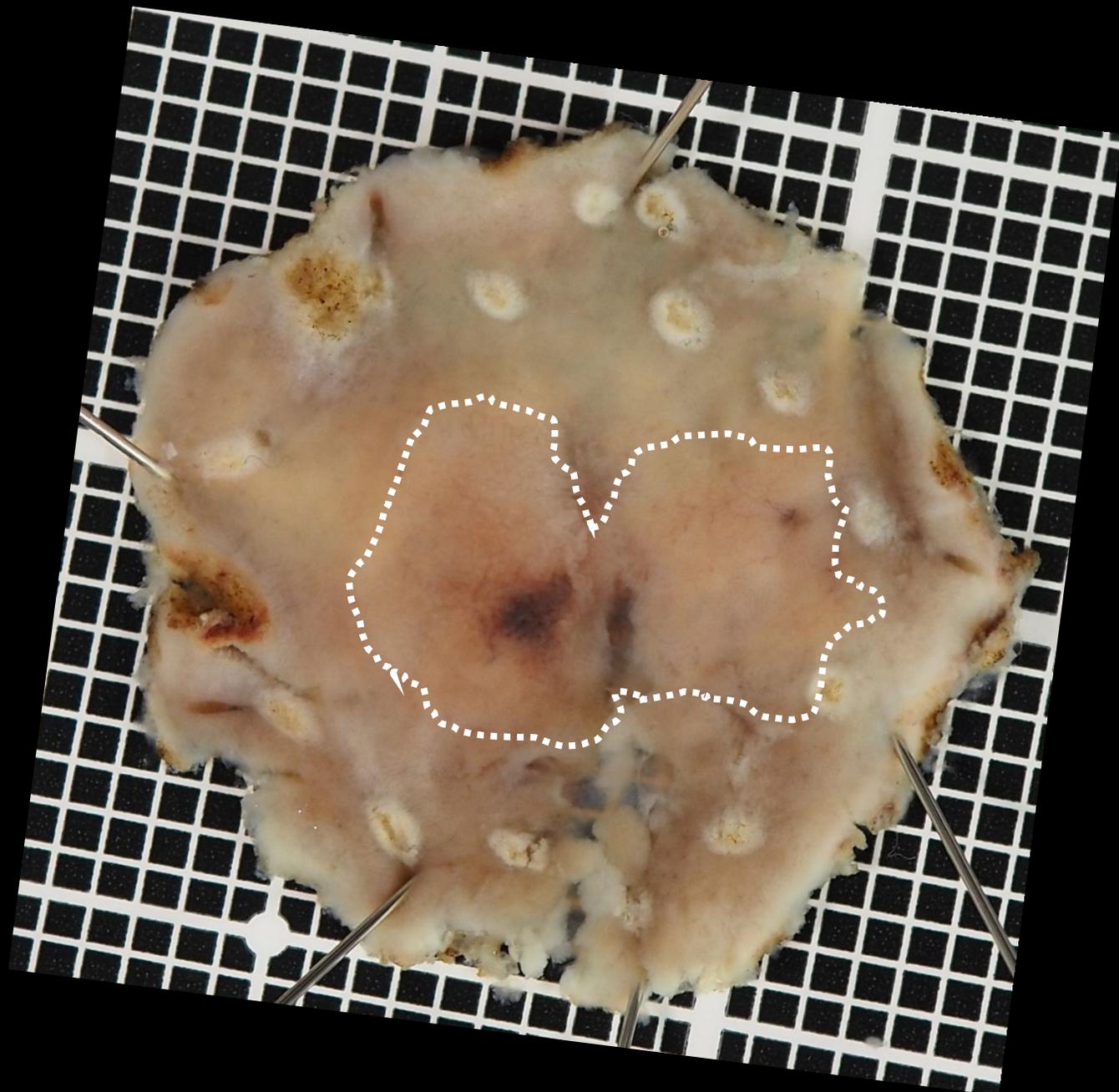


oral

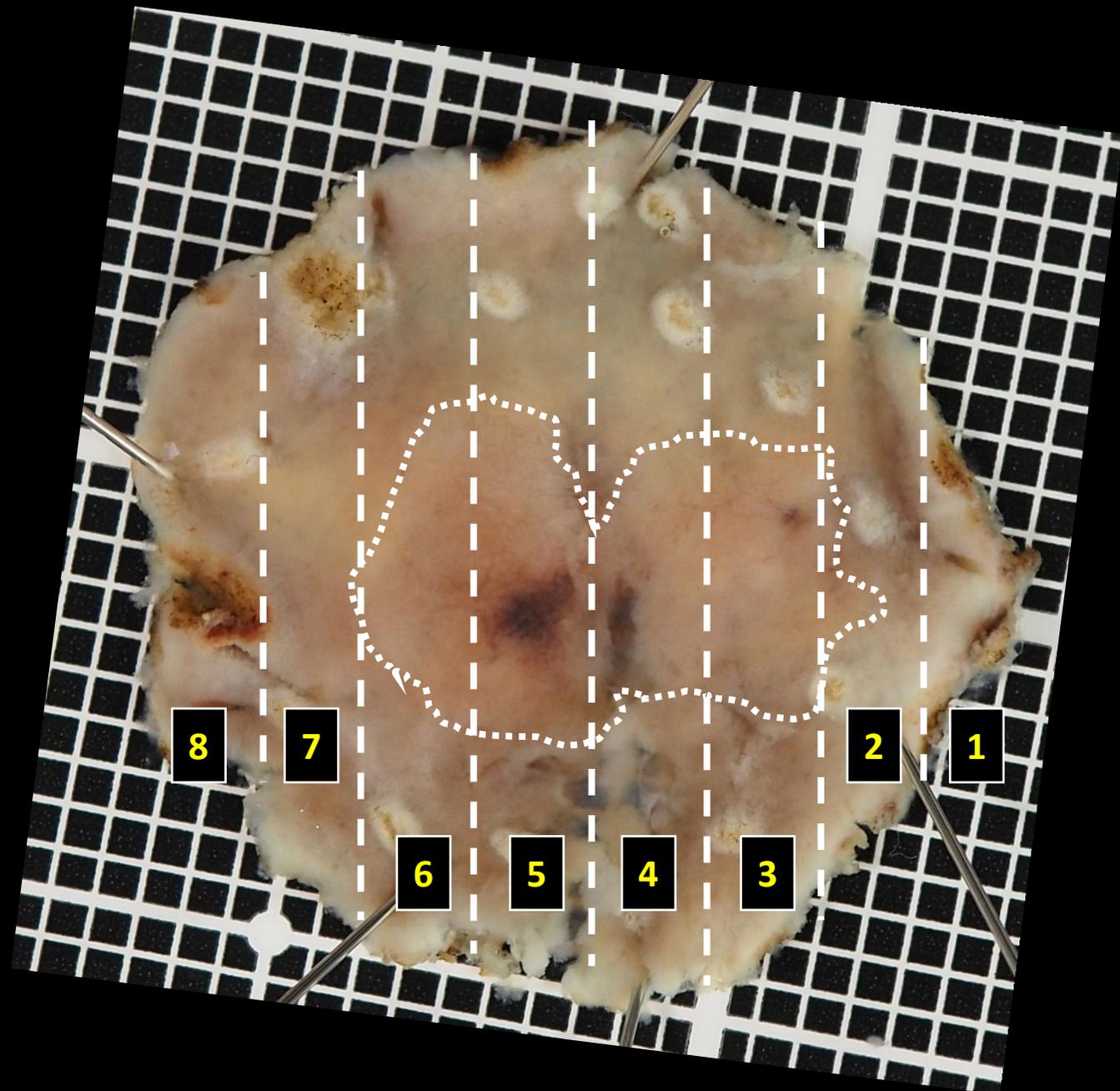




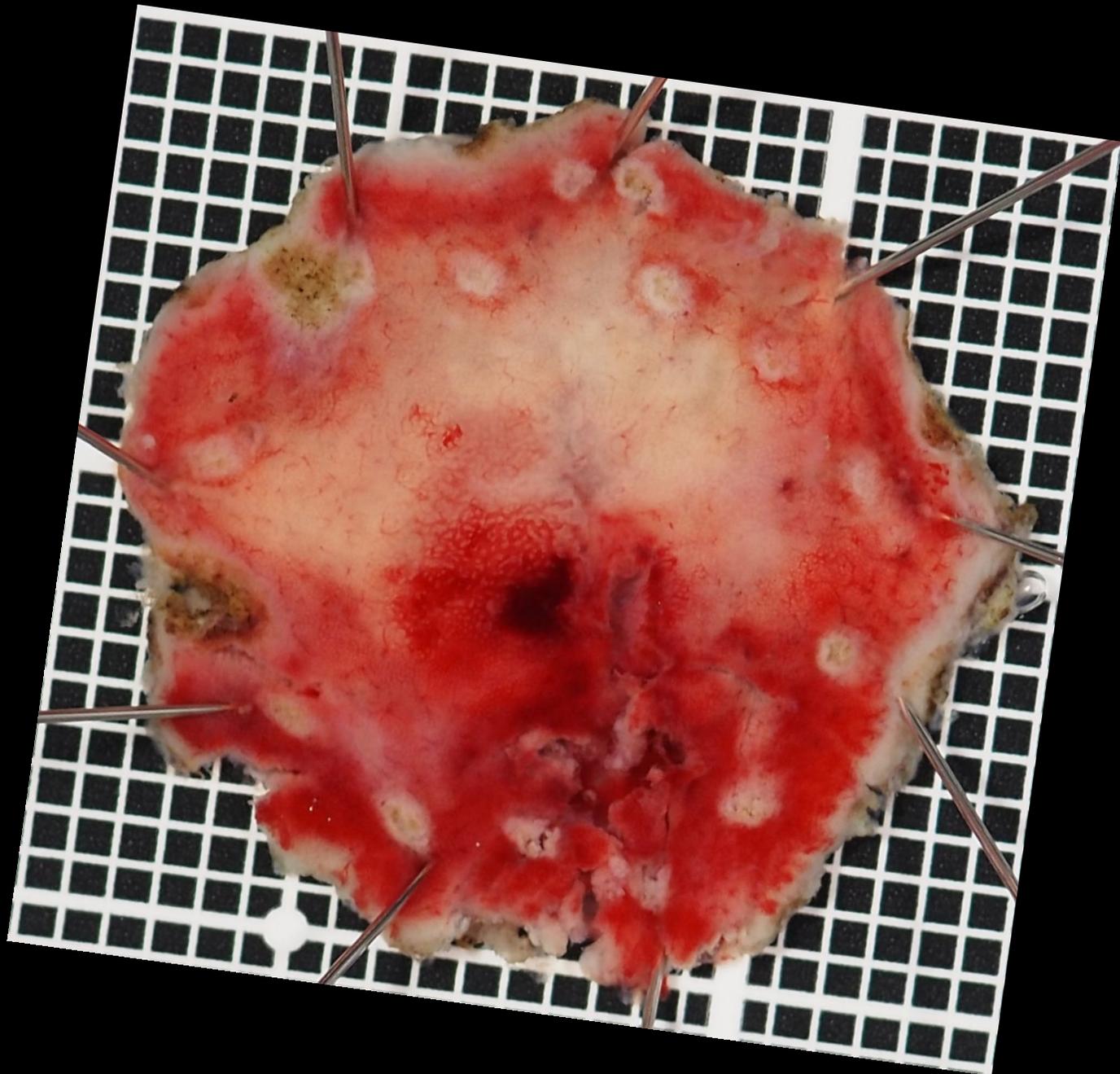
oral



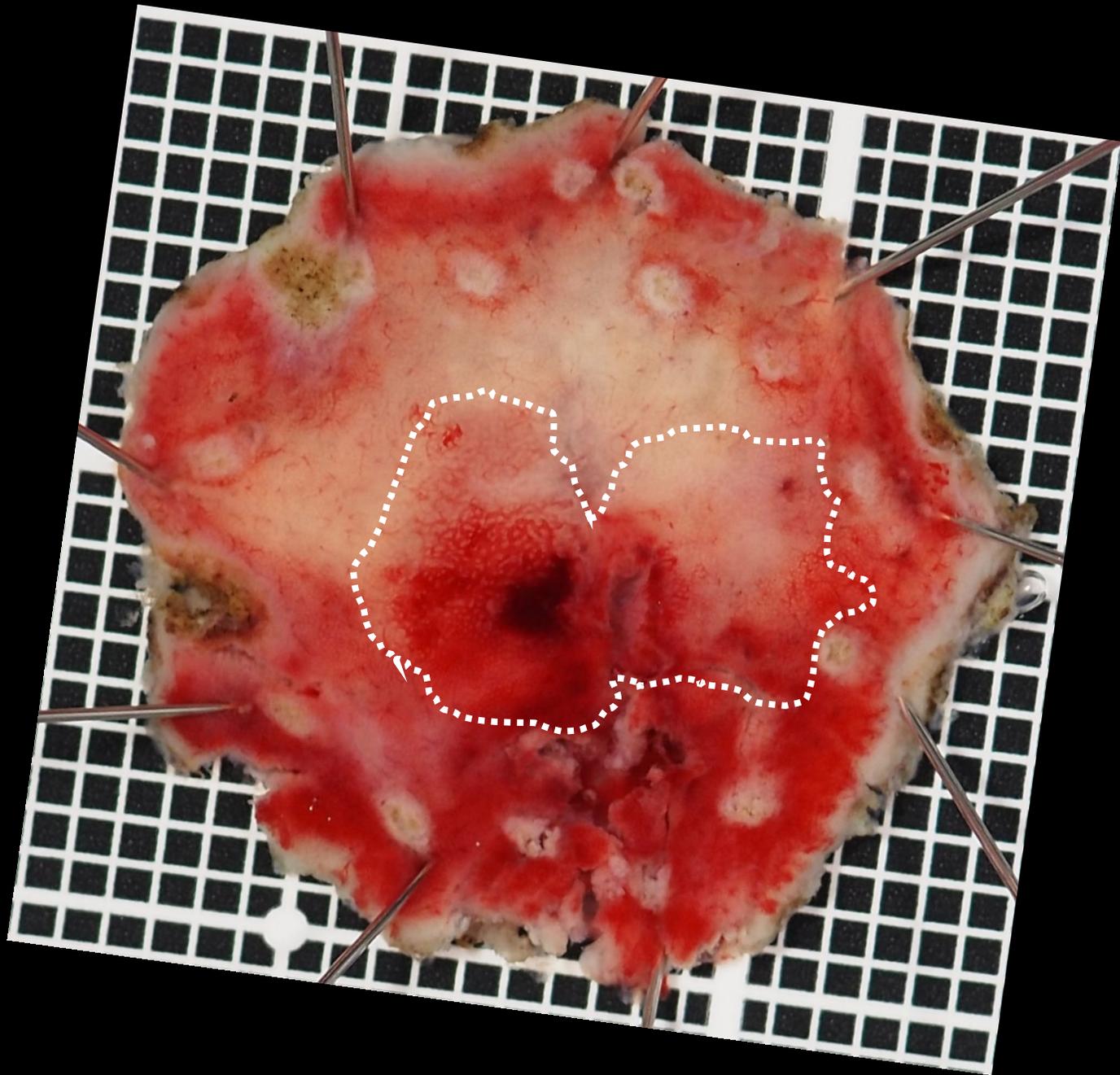
oral



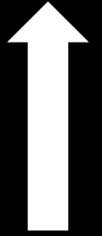
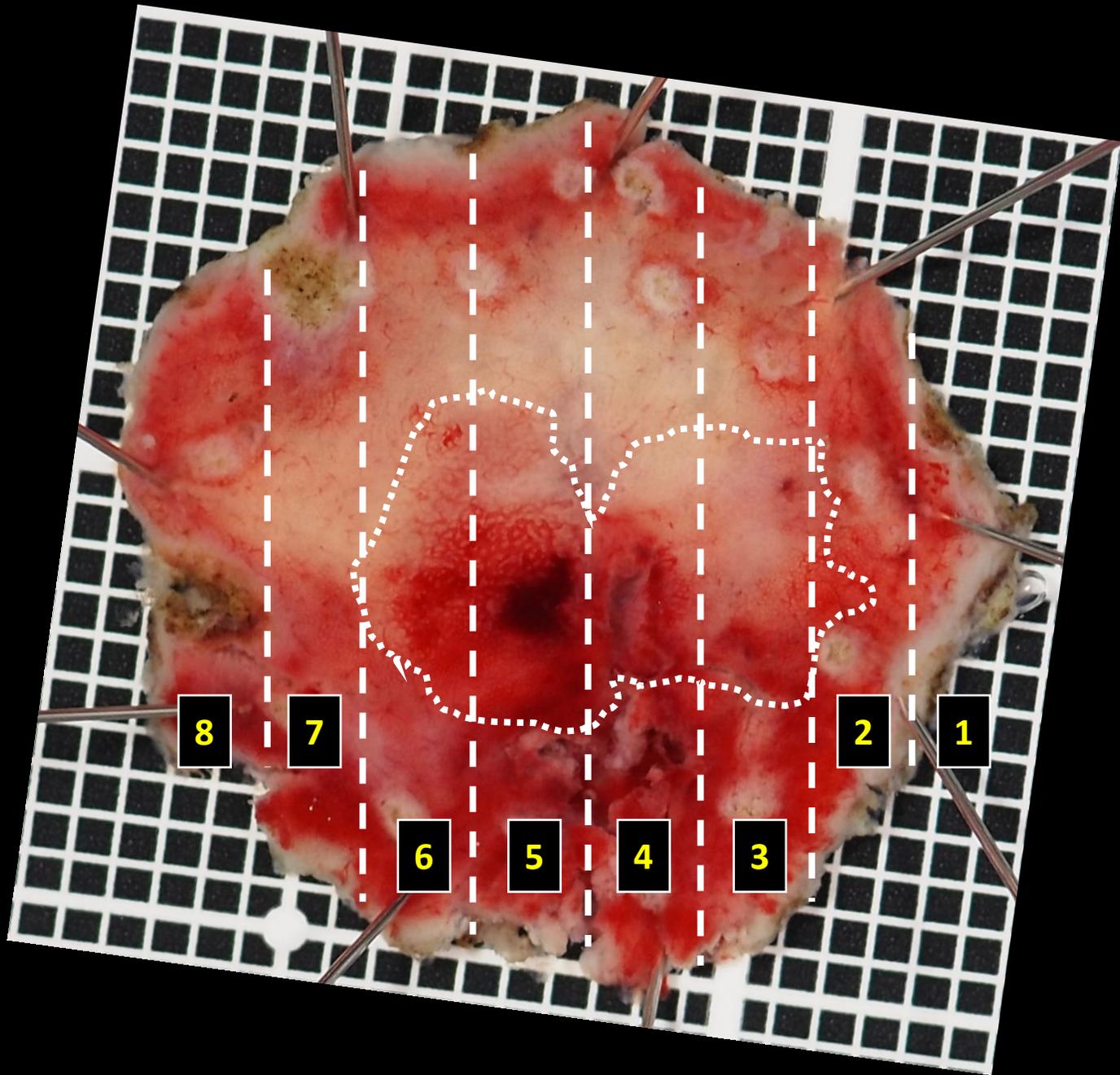
↑
oral



oral



oral



oral

8

7

2

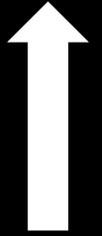
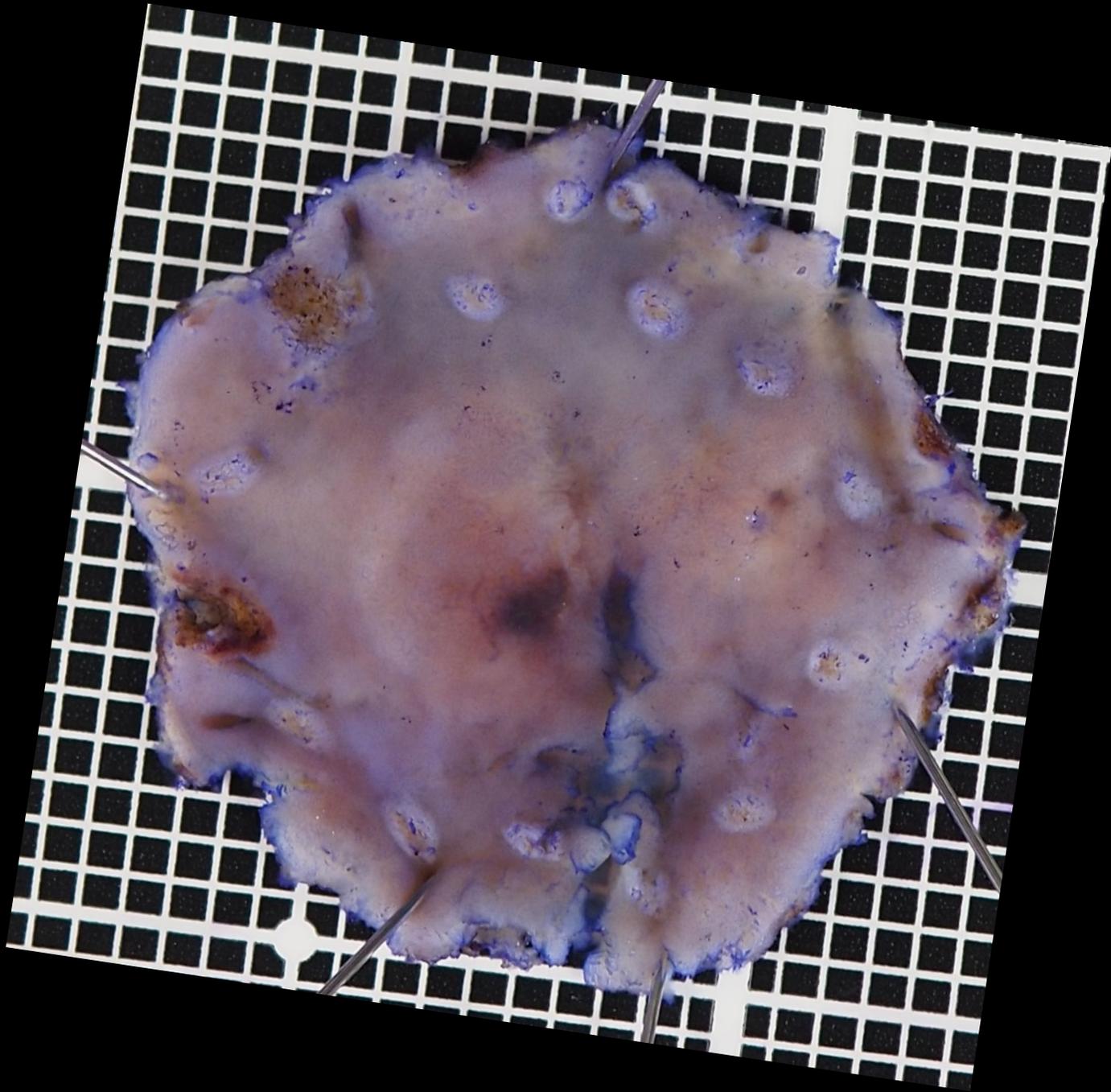
1

6

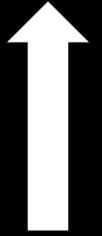
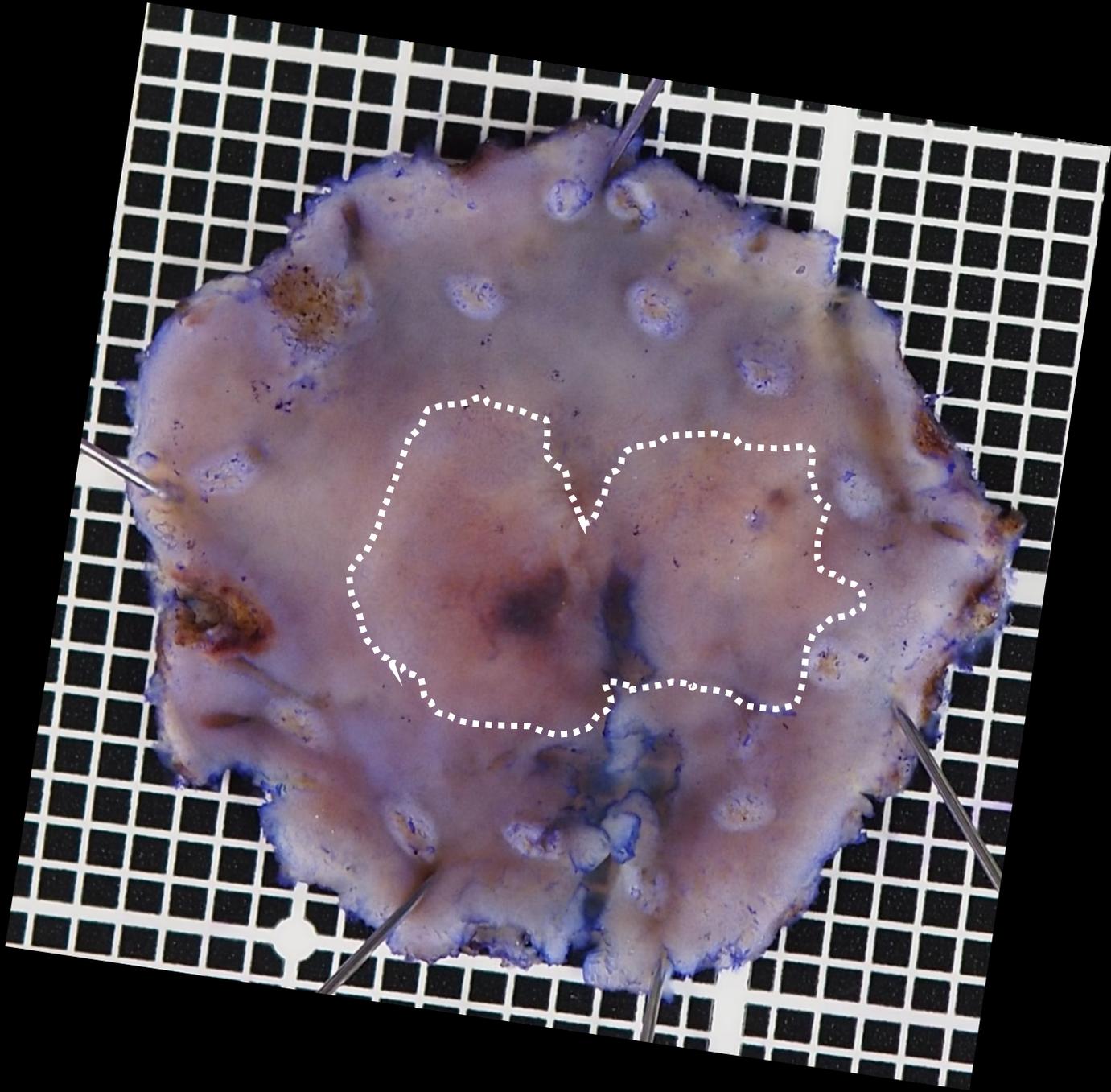
5

4

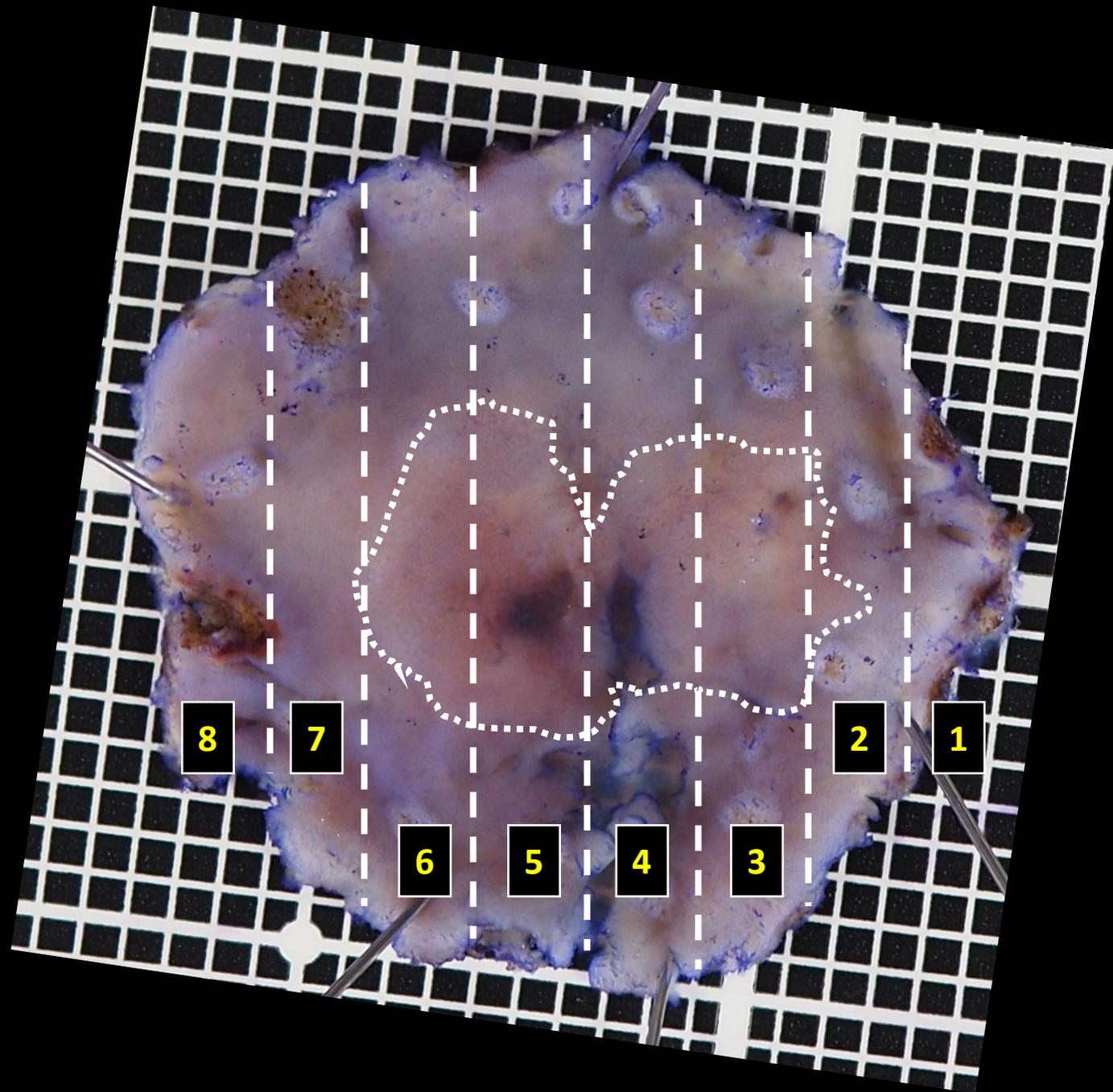
3



oral



oral



oral

8

7

2

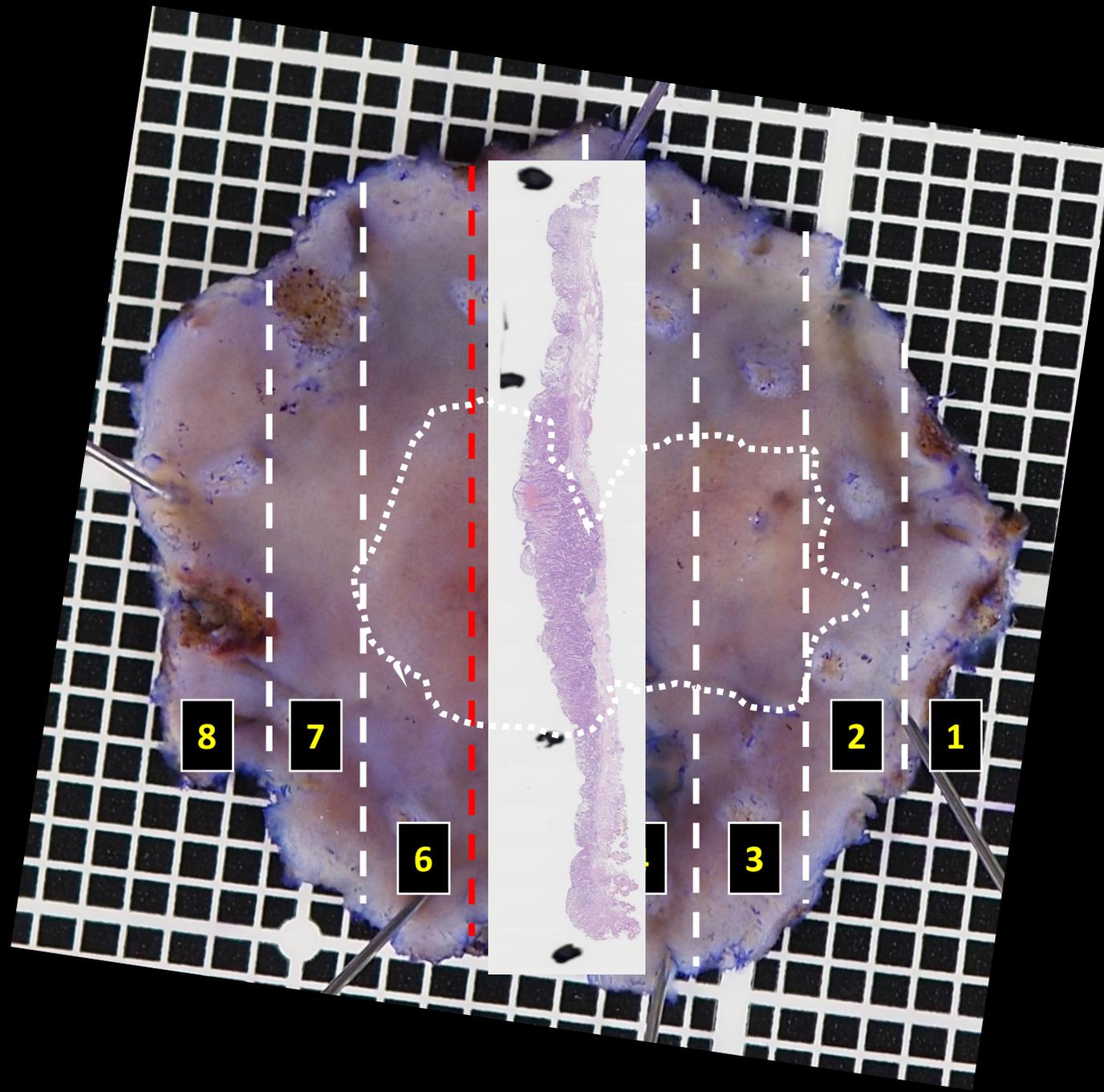
1

6

5

4

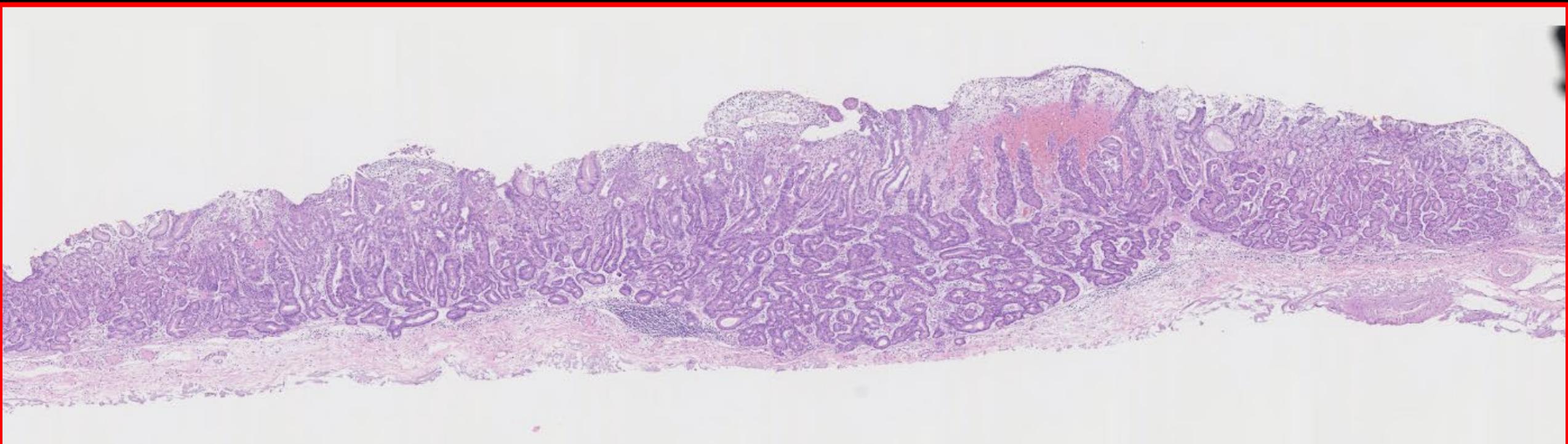
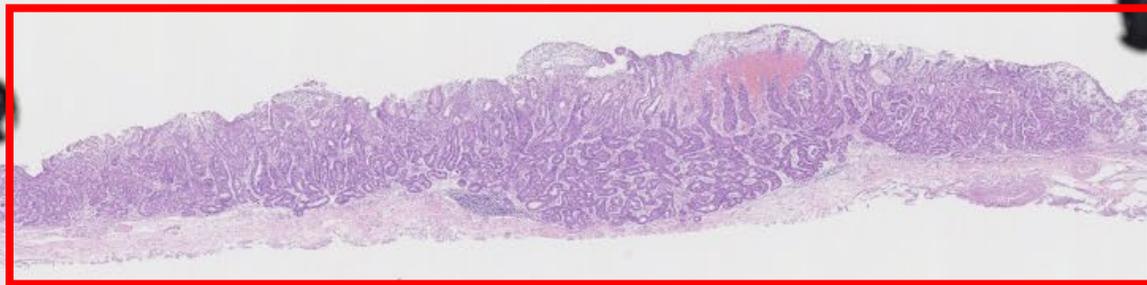
3



↑
oral

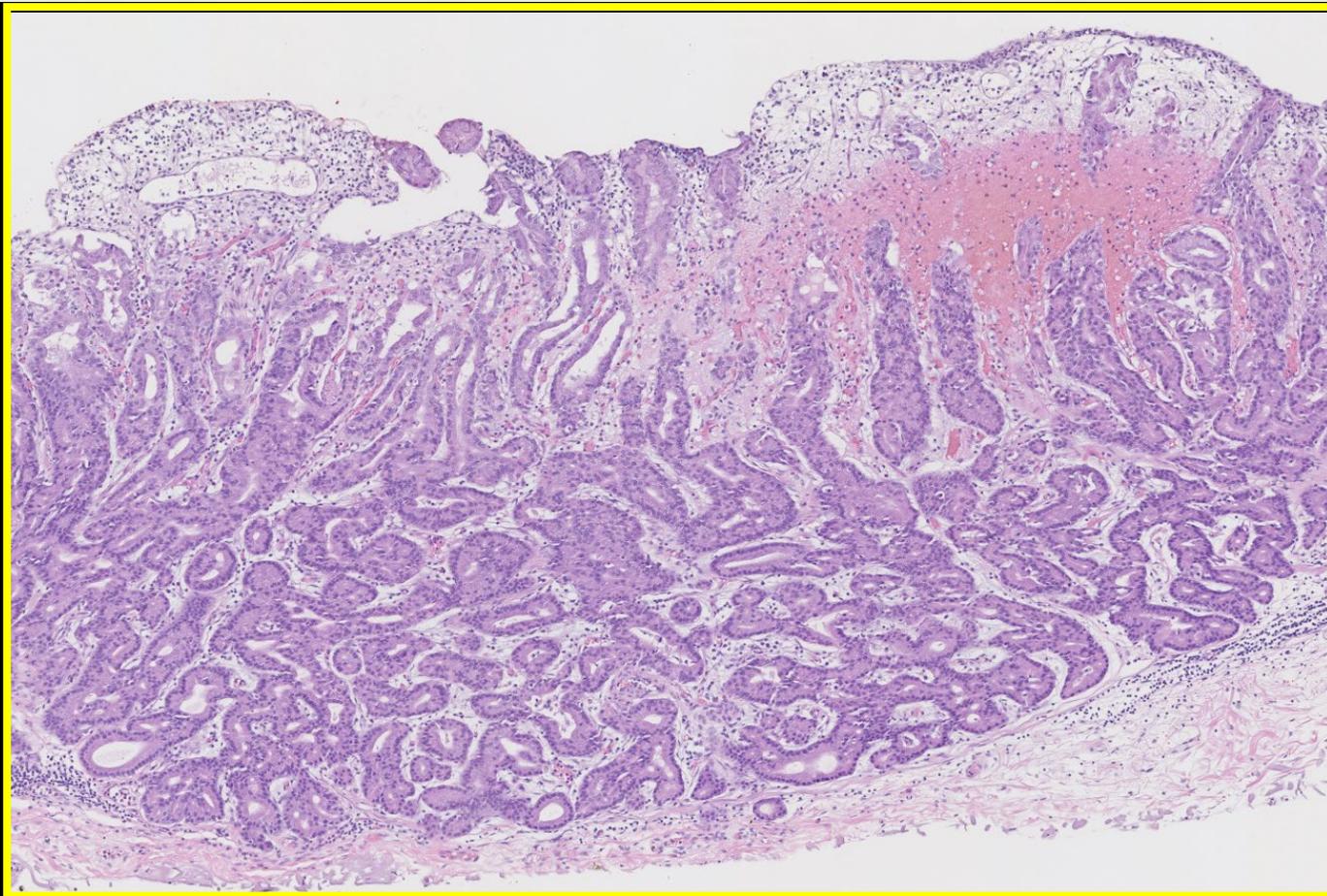
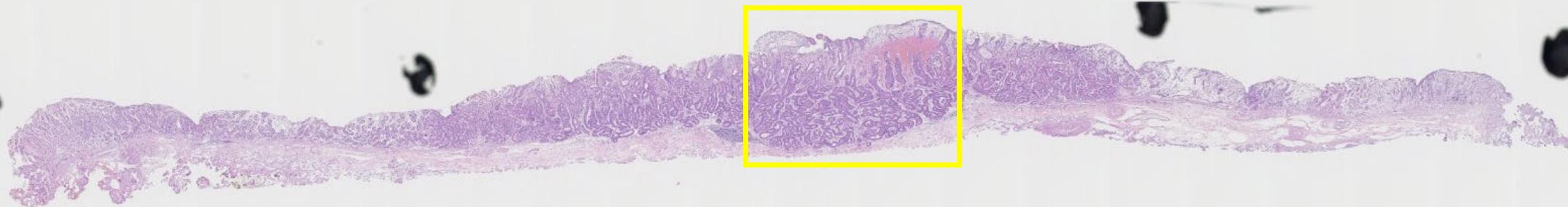
5

HE



5

HE

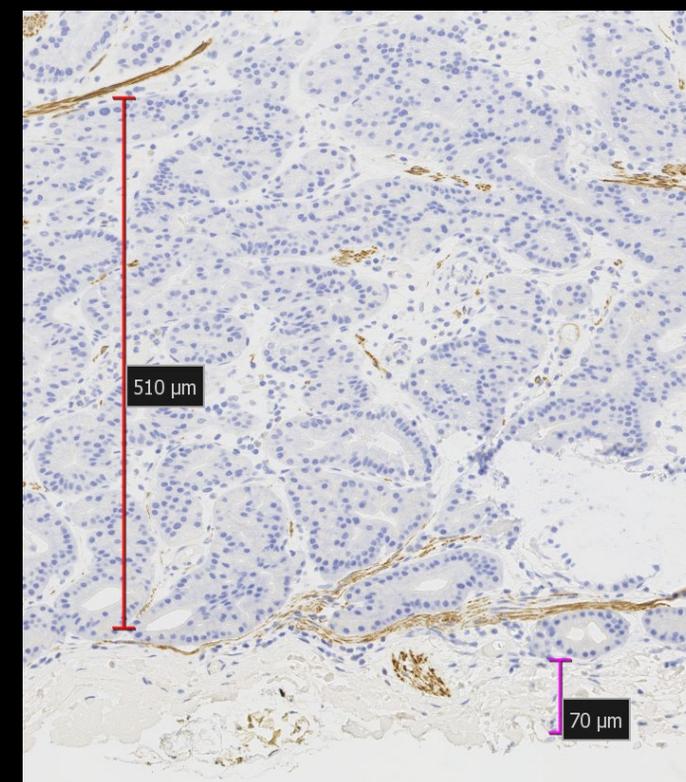
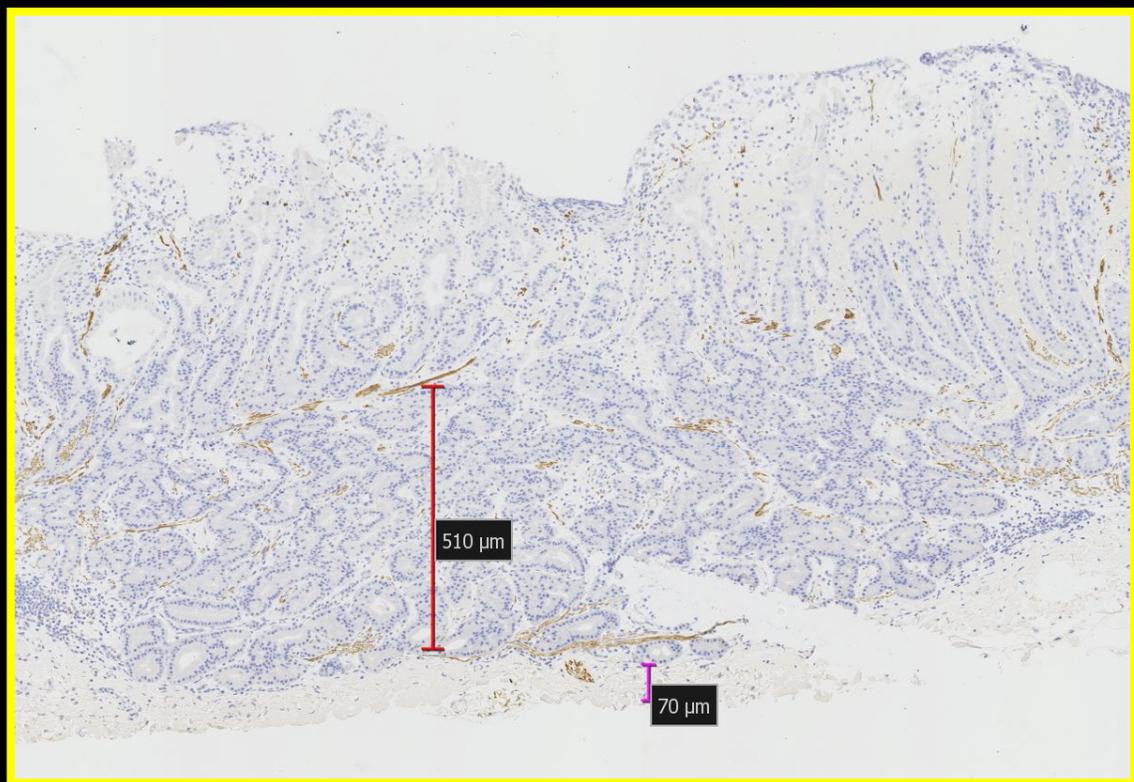


5

Desmin



粘膜筋板から腫瘍最深部までの距離は510 μ m(SM2), 水平断端陰性(pVM0)

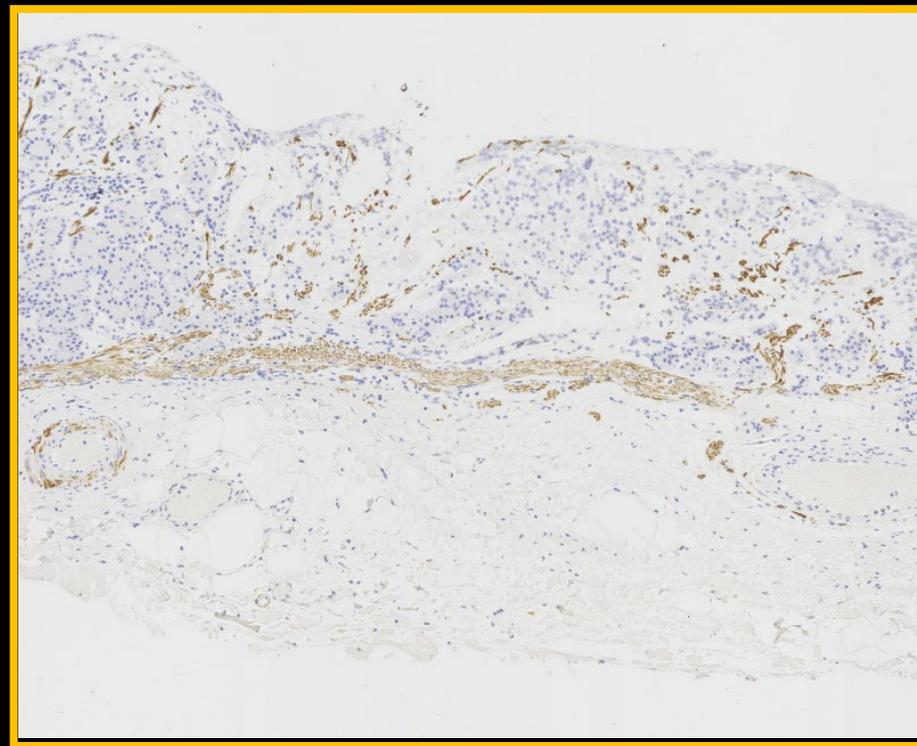
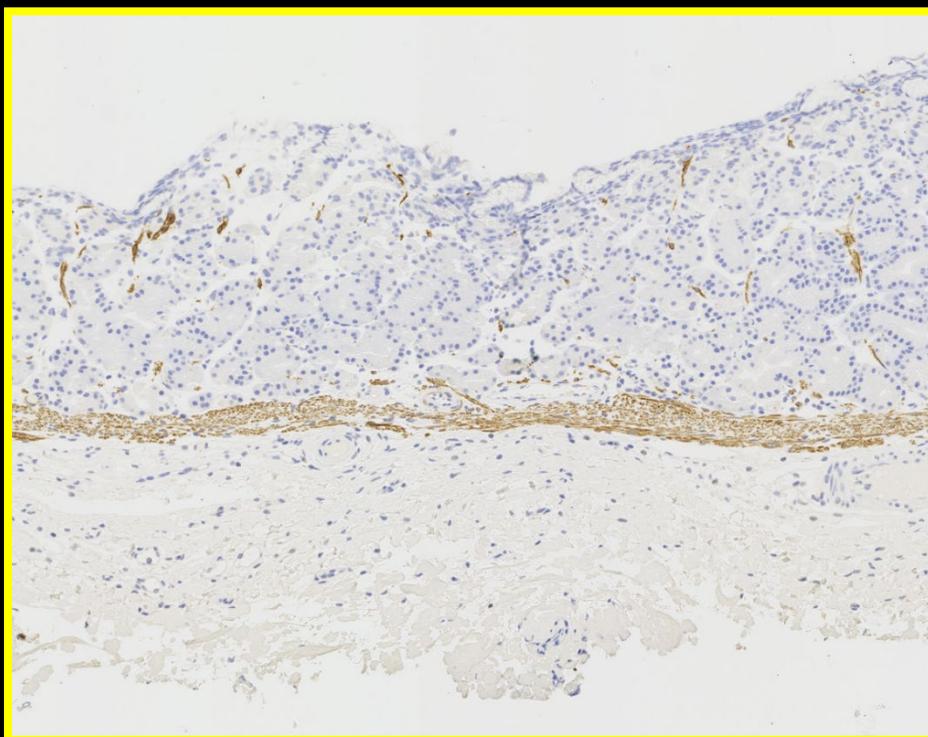


5

Desmin



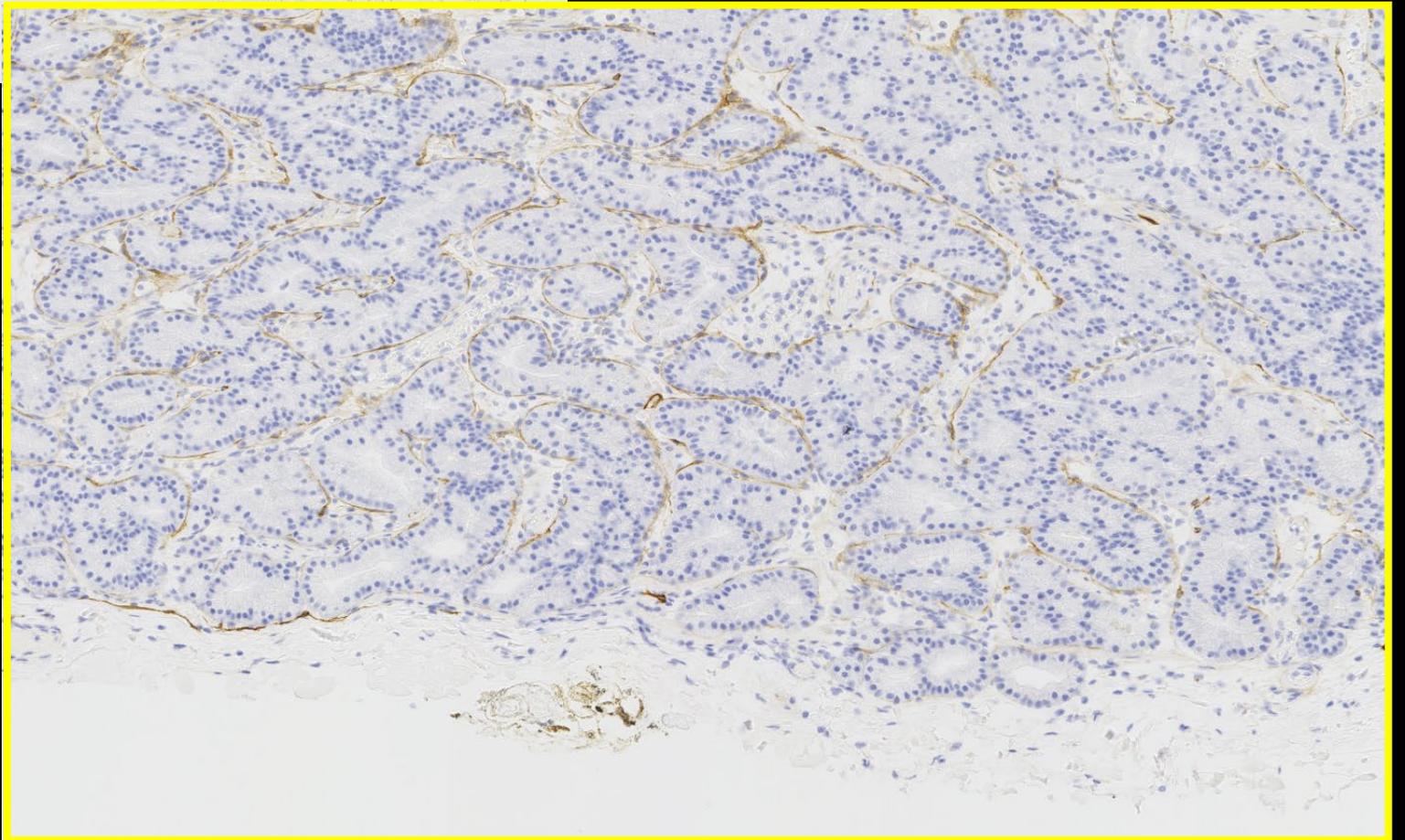
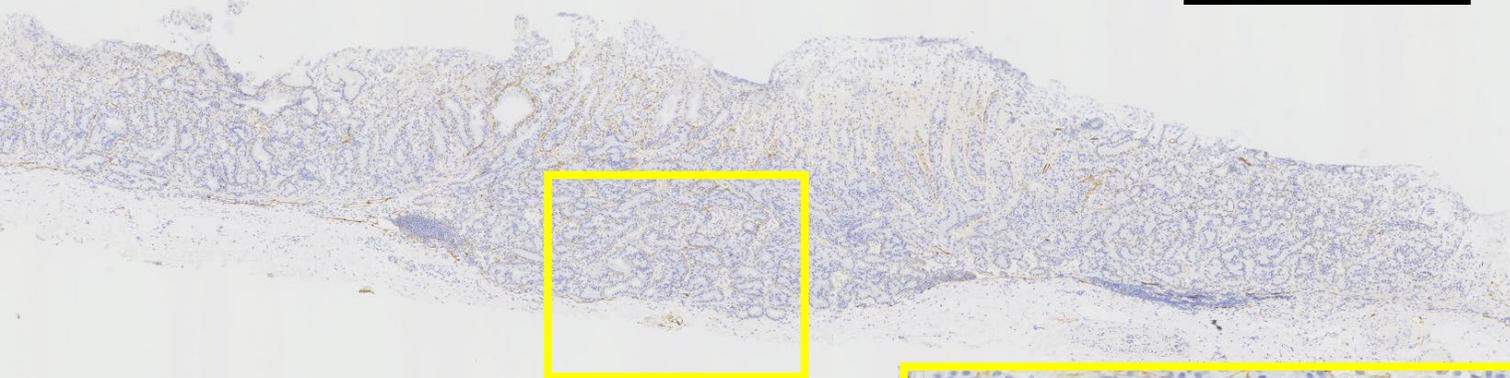
側方断端陰性 (pHM0)



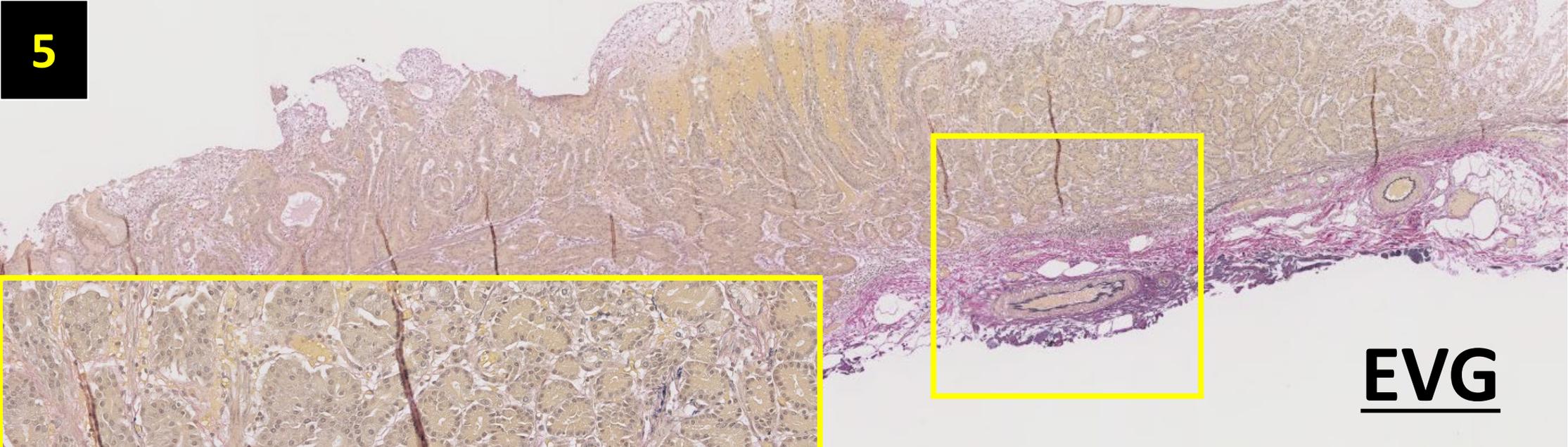
5

D2-40

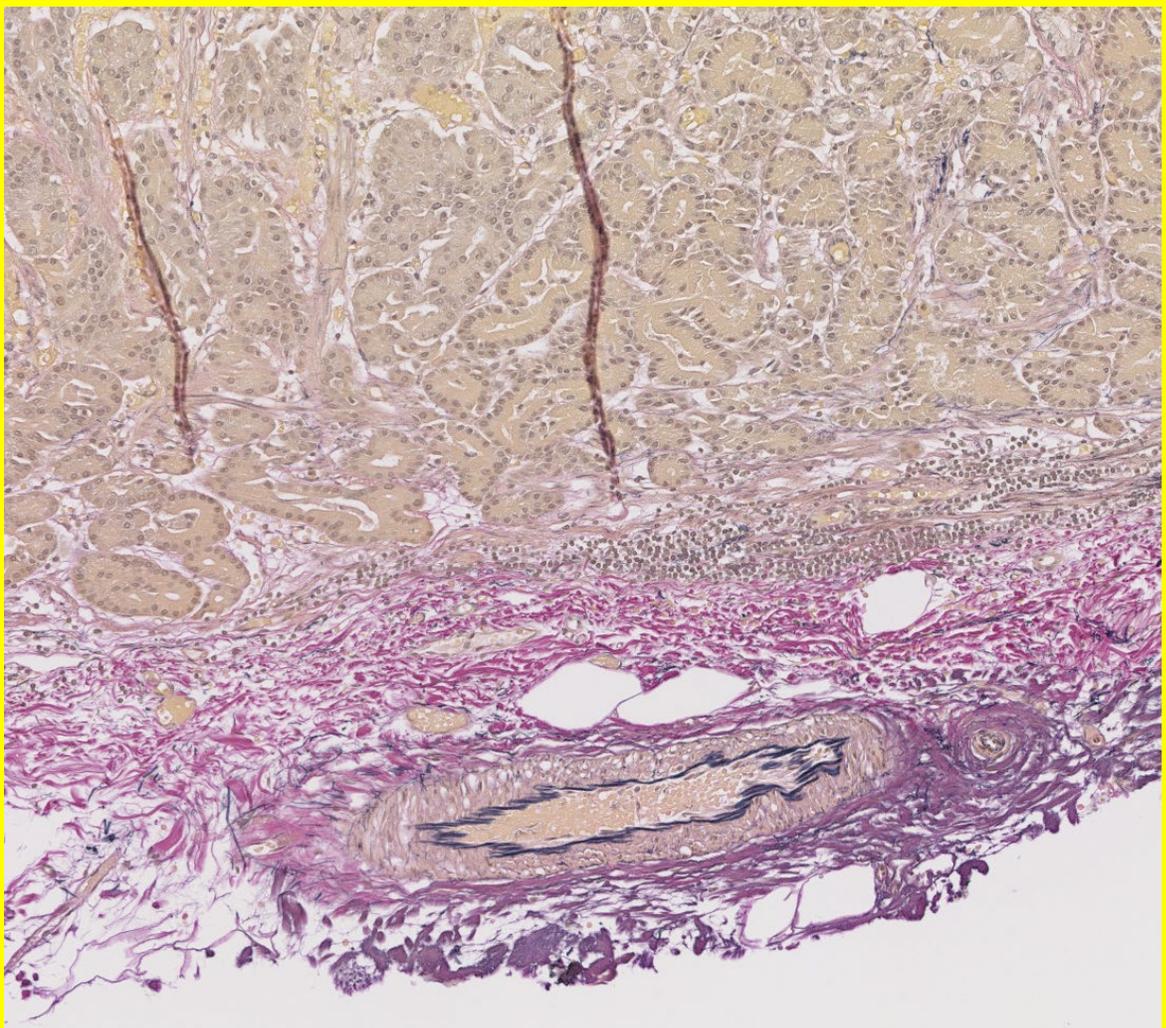
リンパ管侵襲陰性
(Ly0)



5

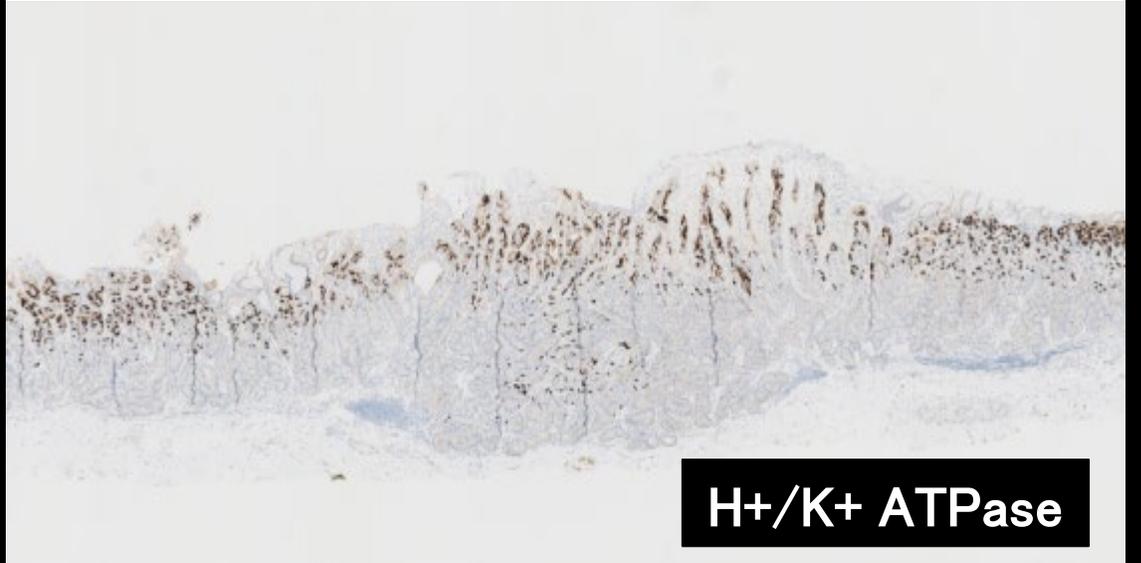
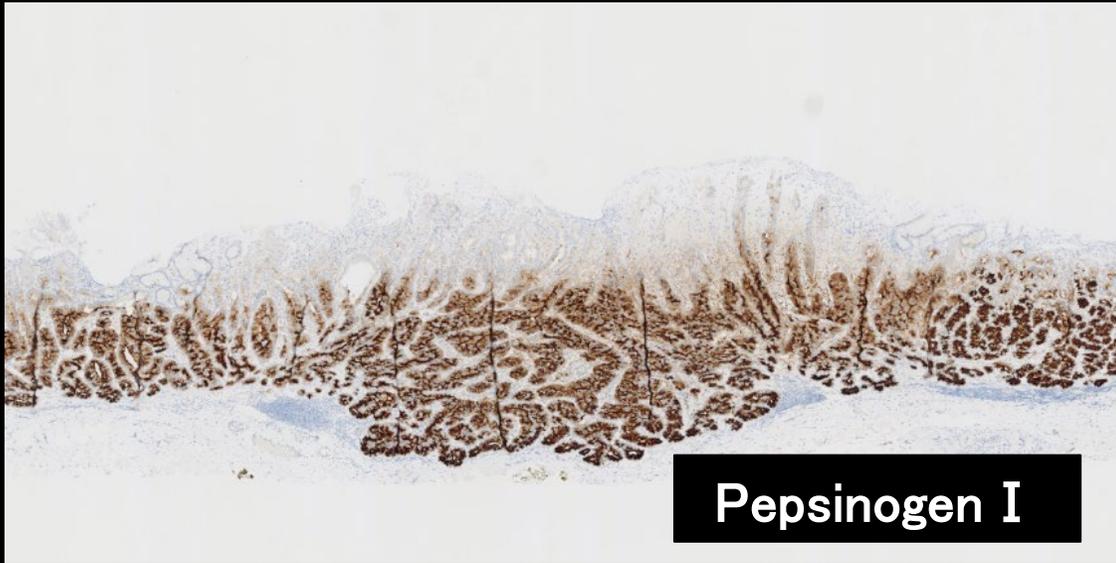
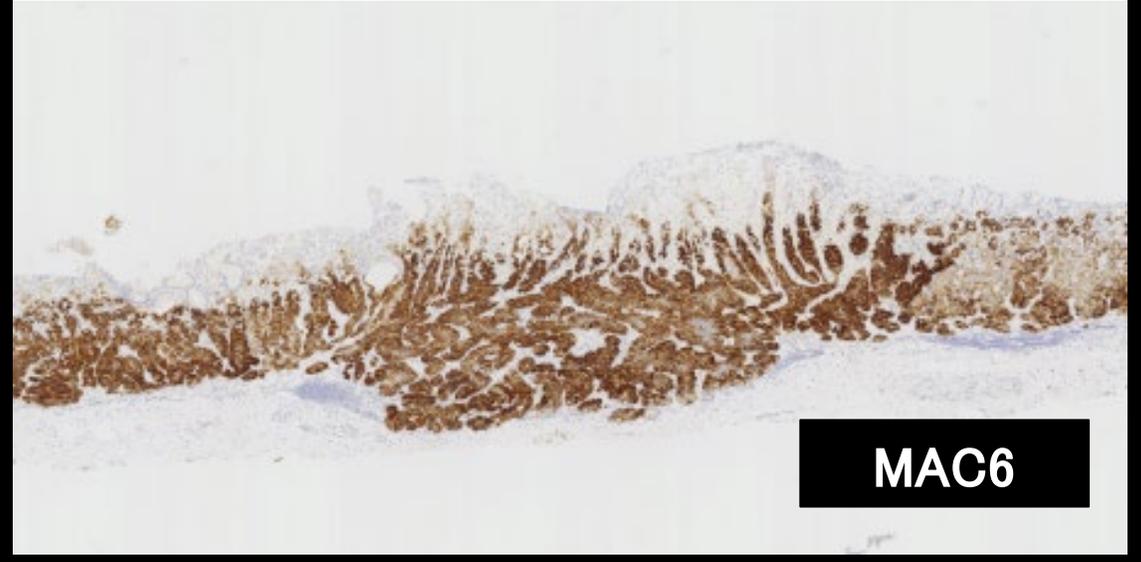
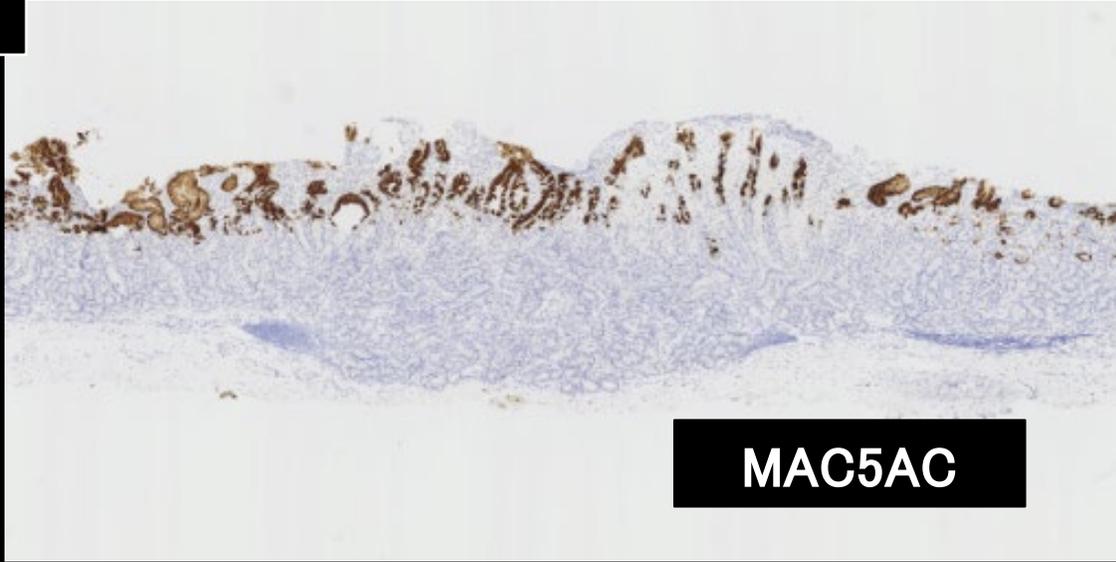


EVG

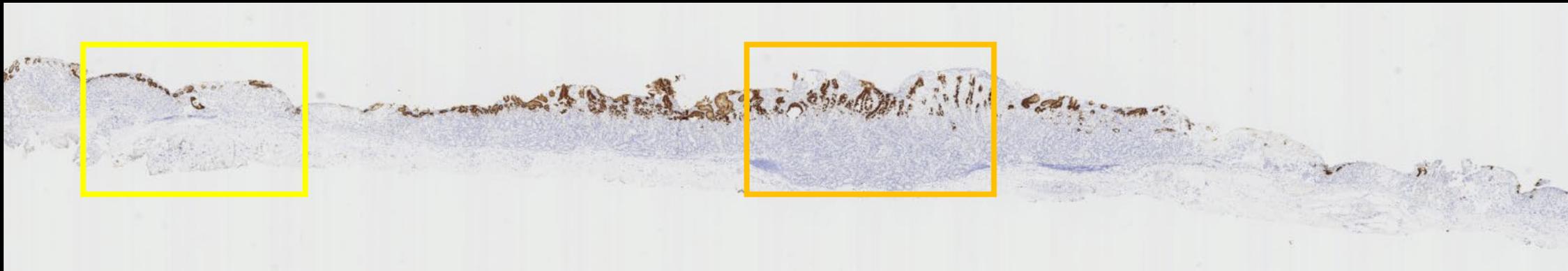


静脈侵襲陰性 (V0)

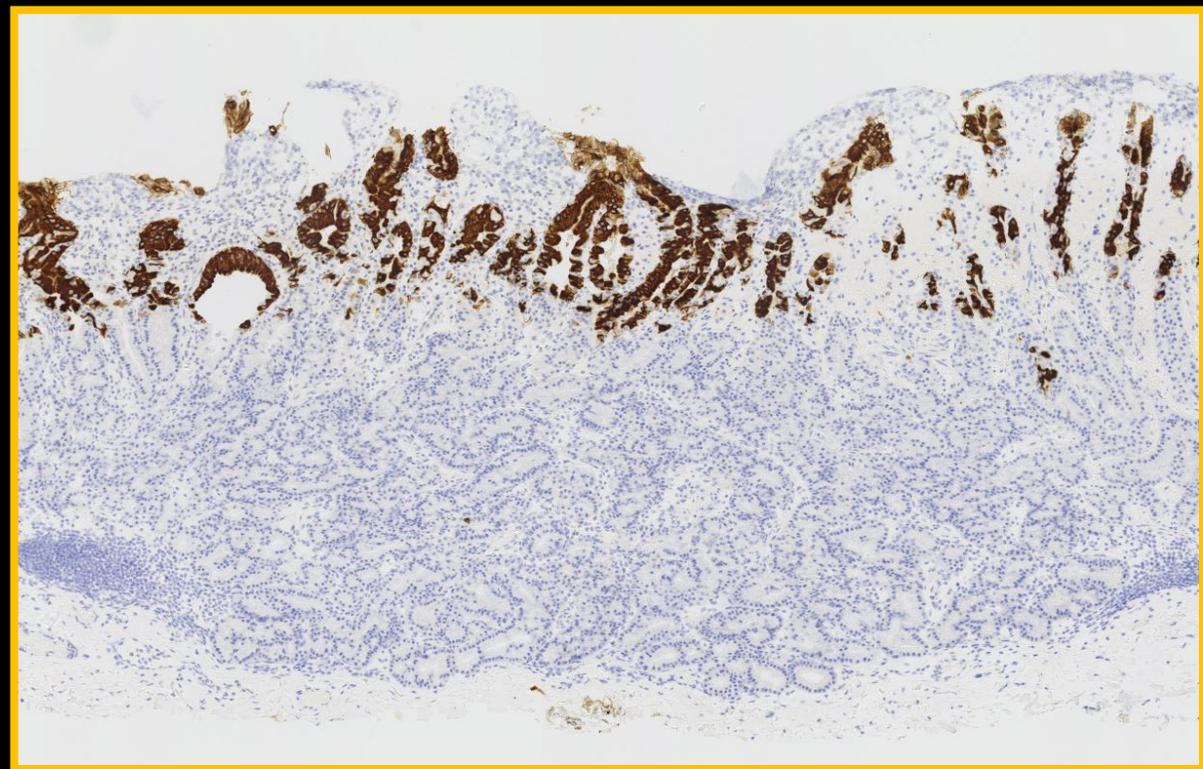
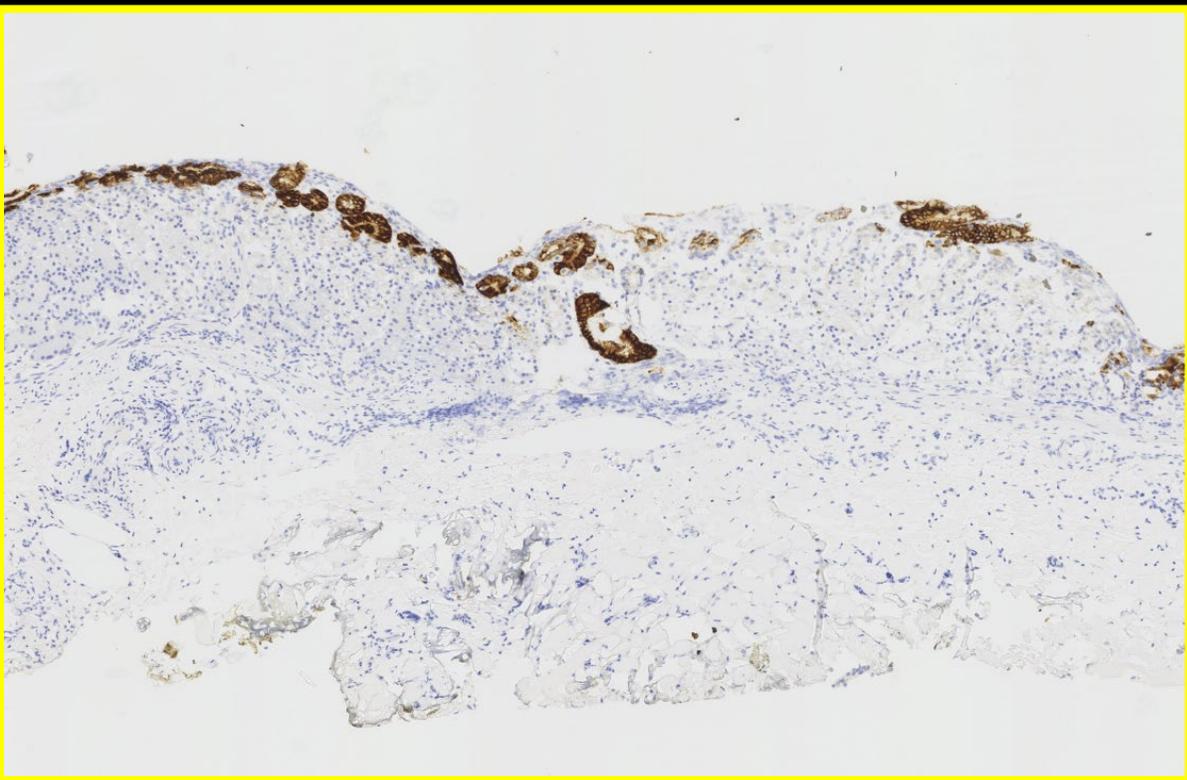
5

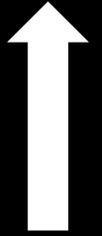
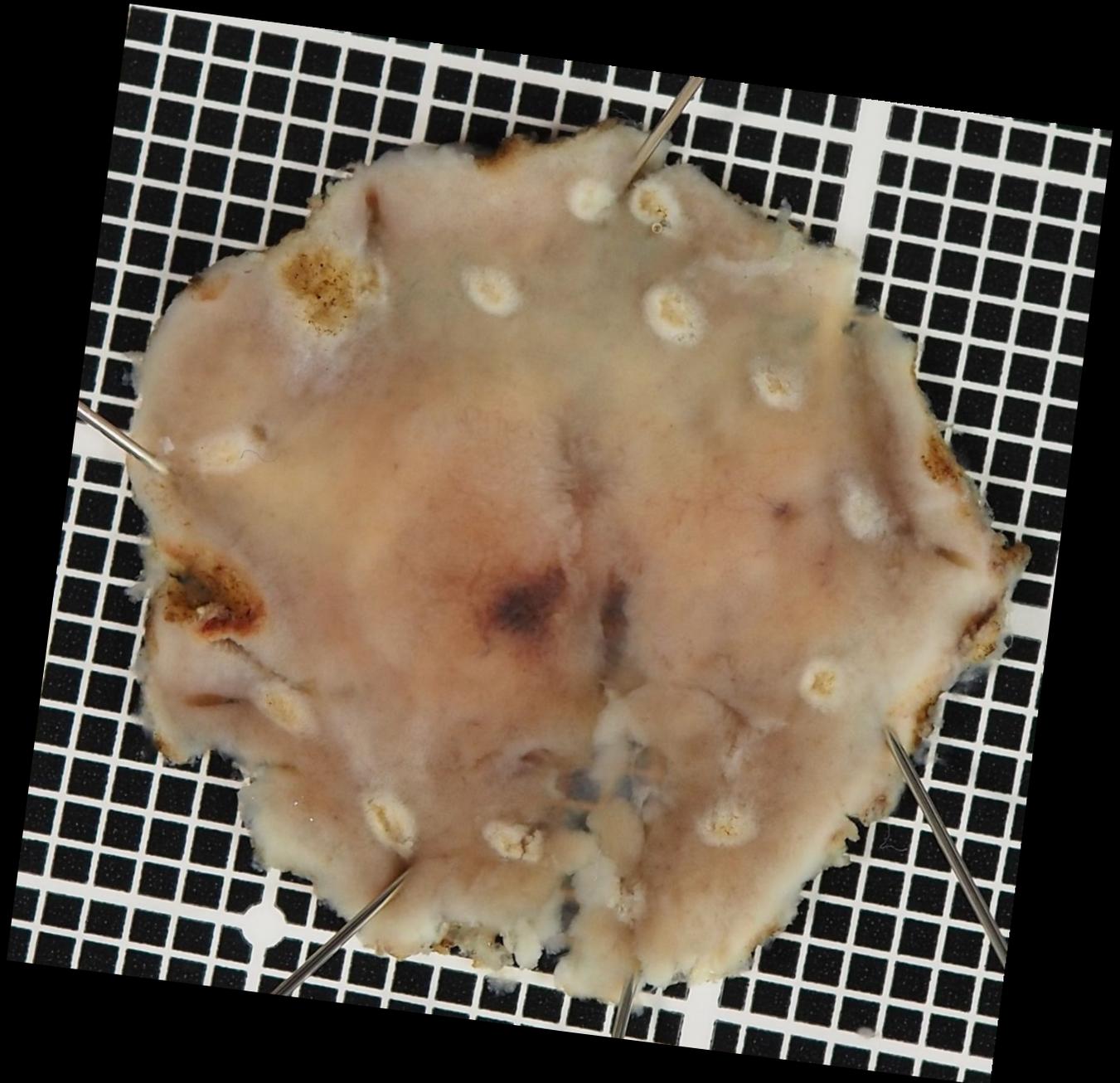


5

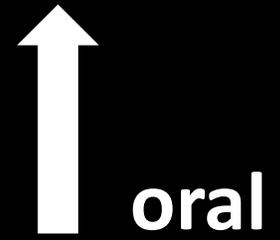
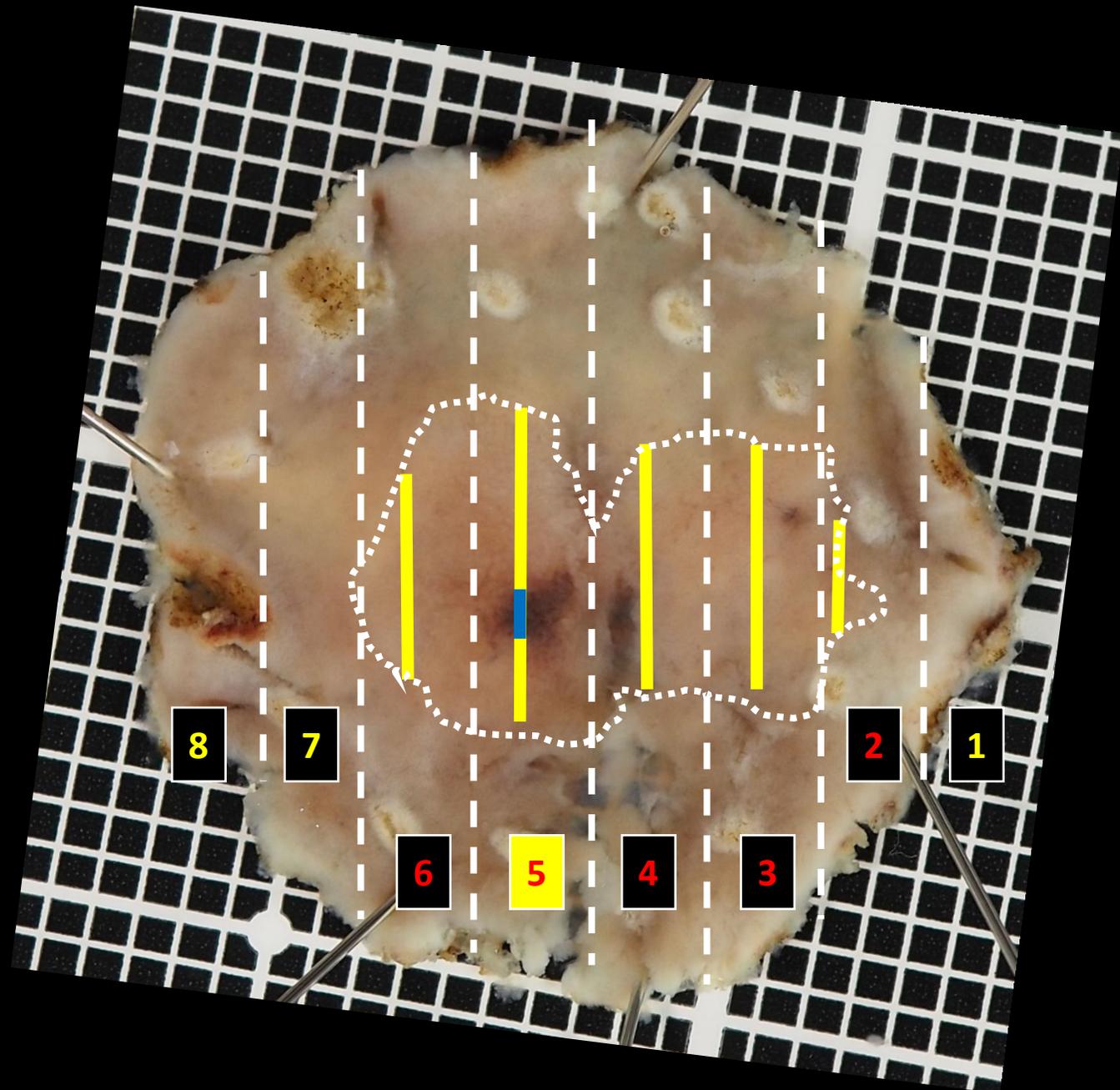
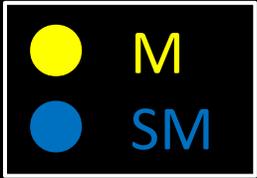


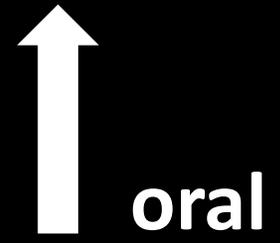
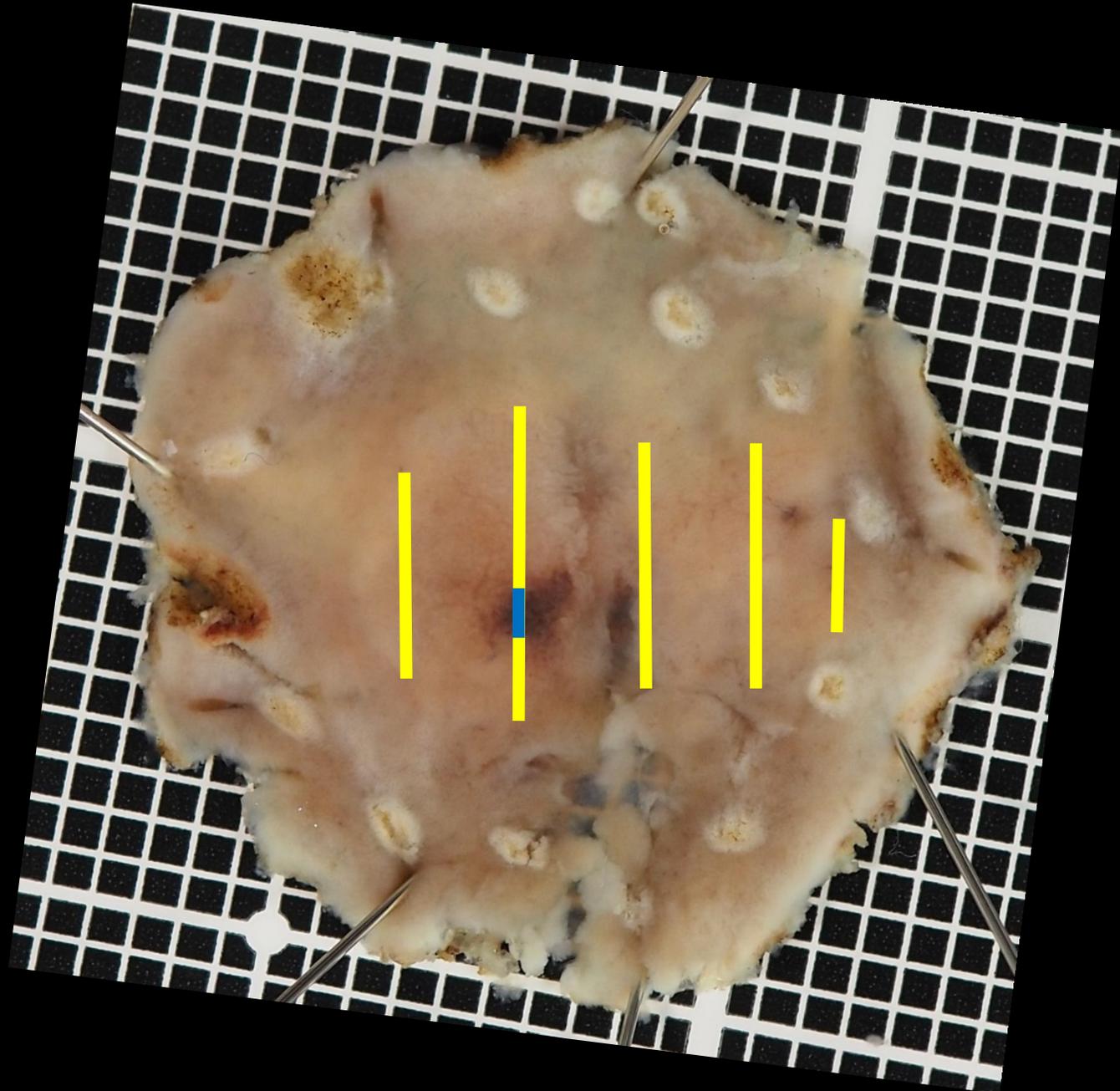
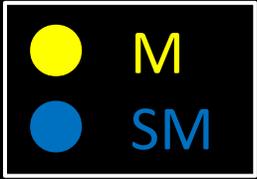
MAC5AC陽性

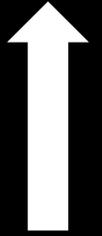
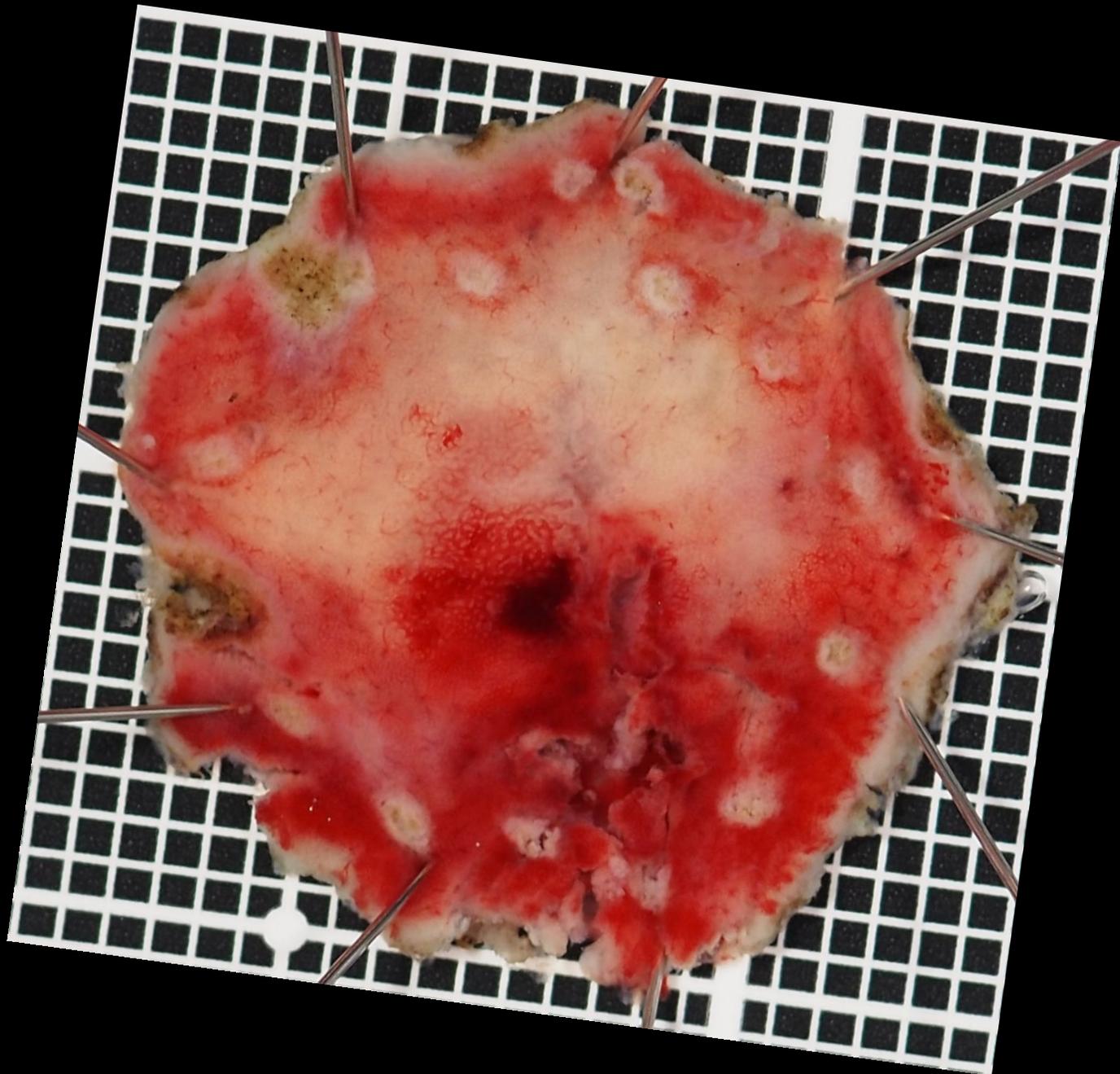




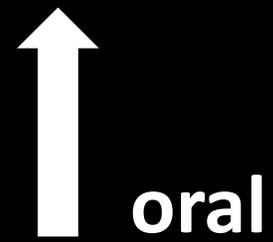
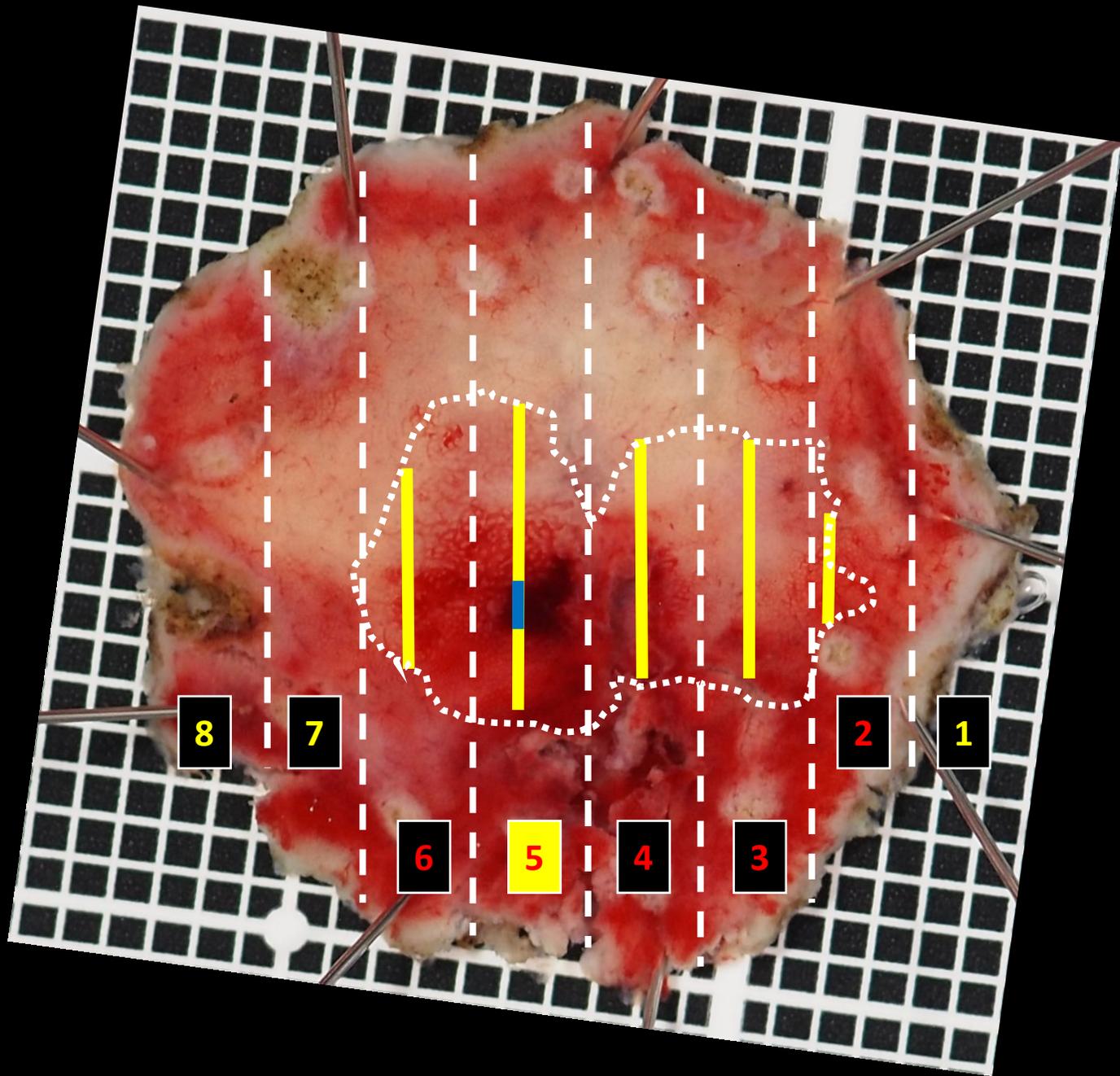
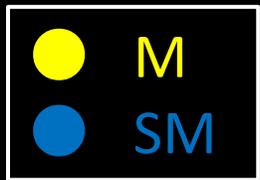
oral

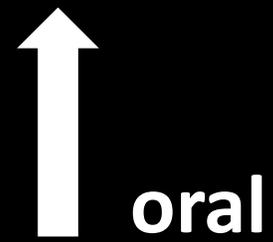
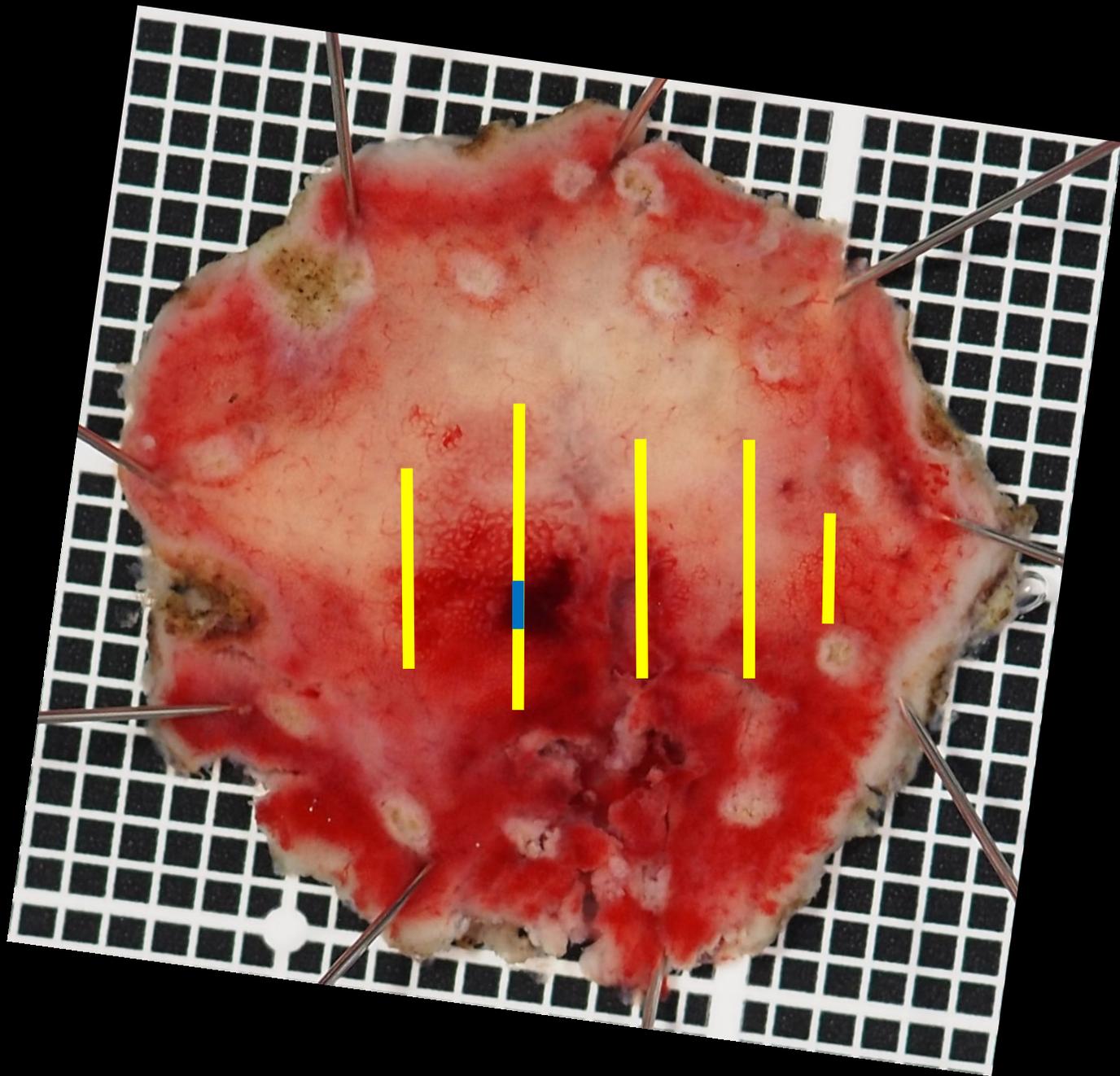
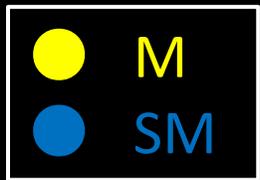


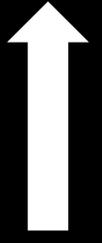
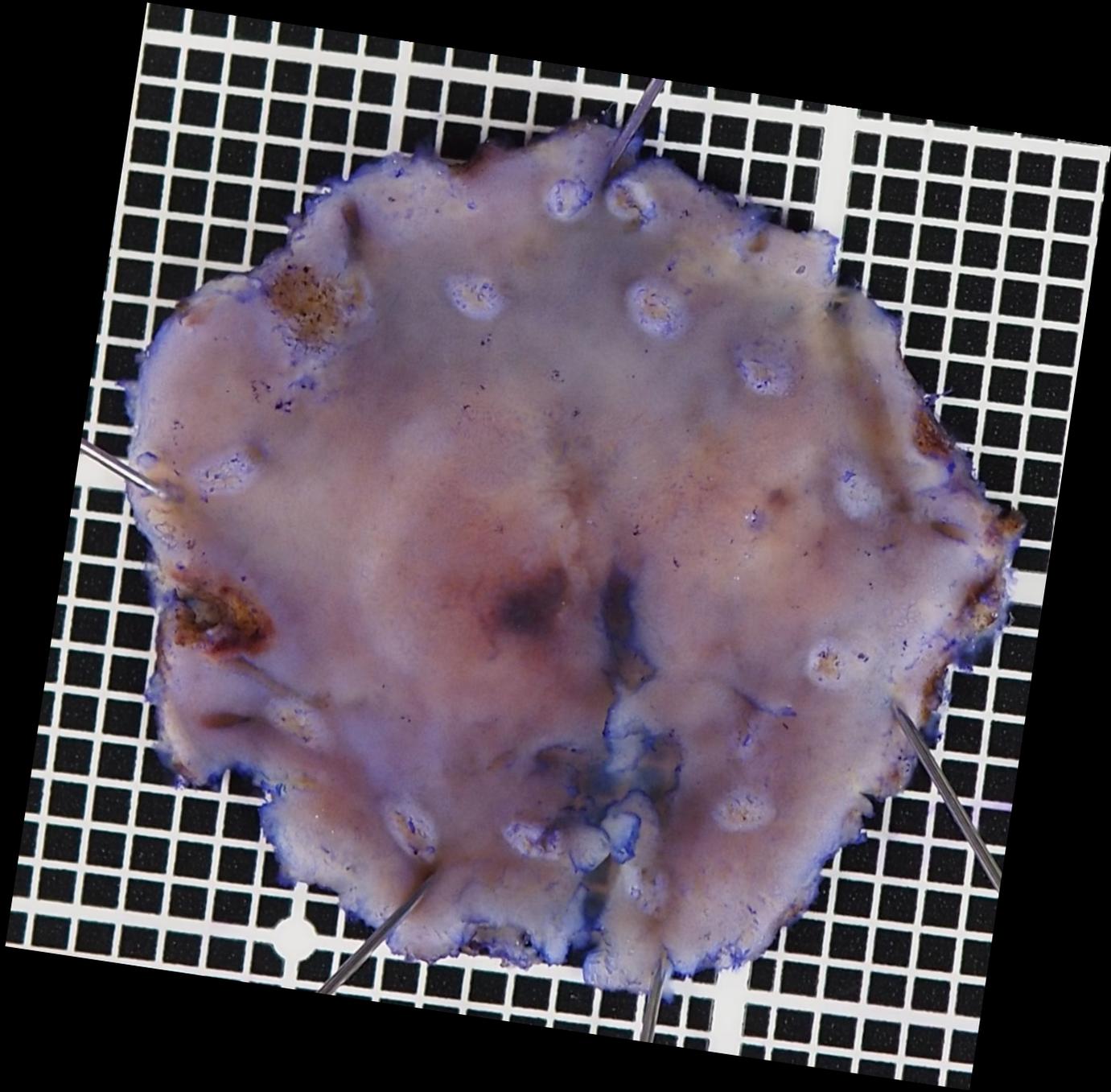




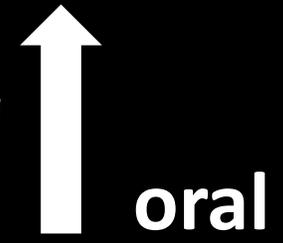
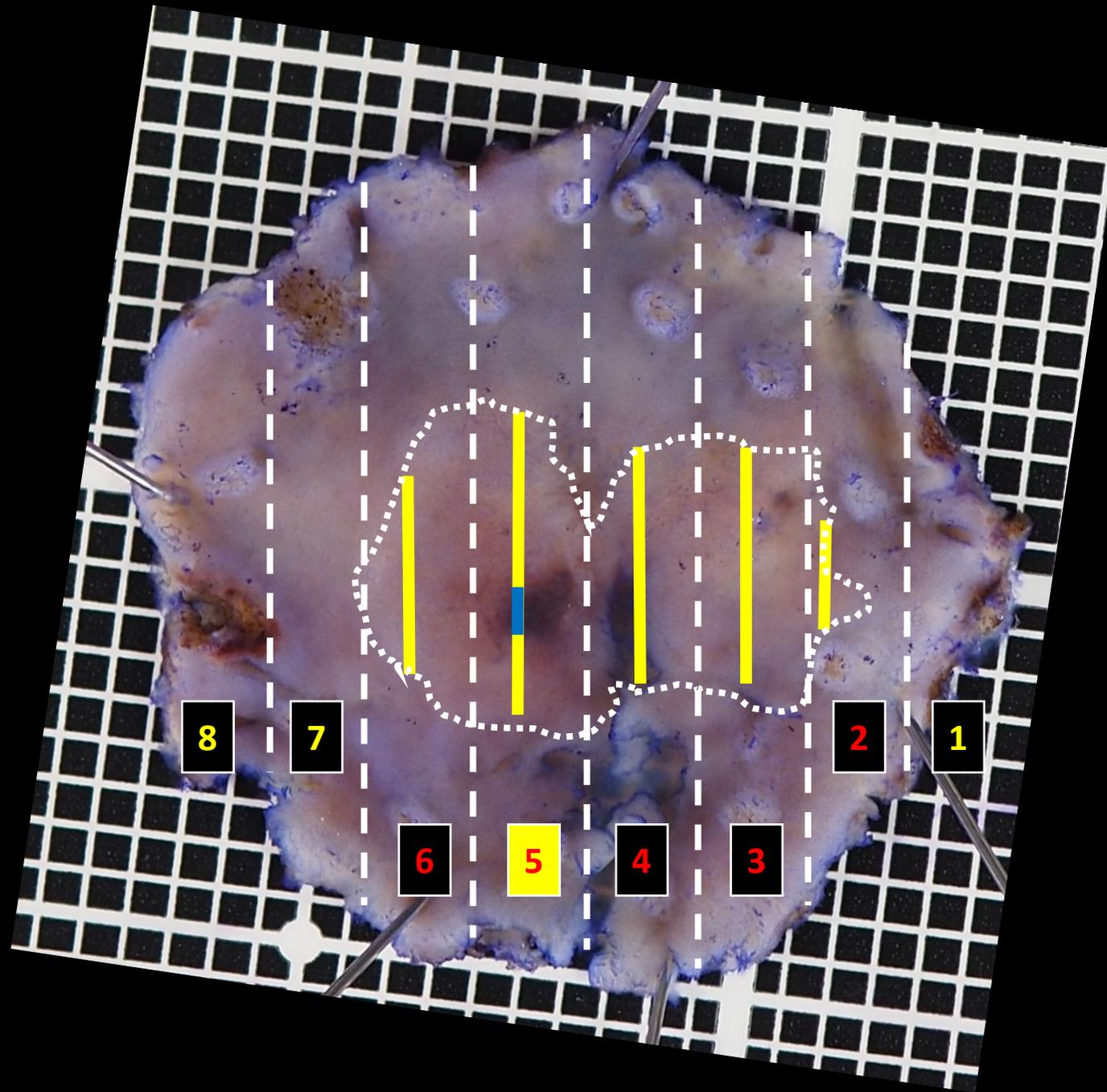
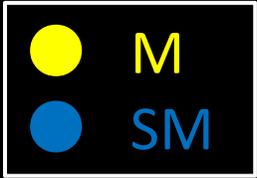
oral

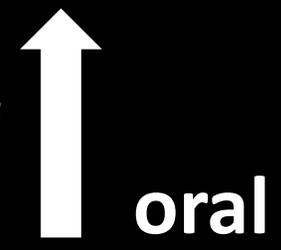
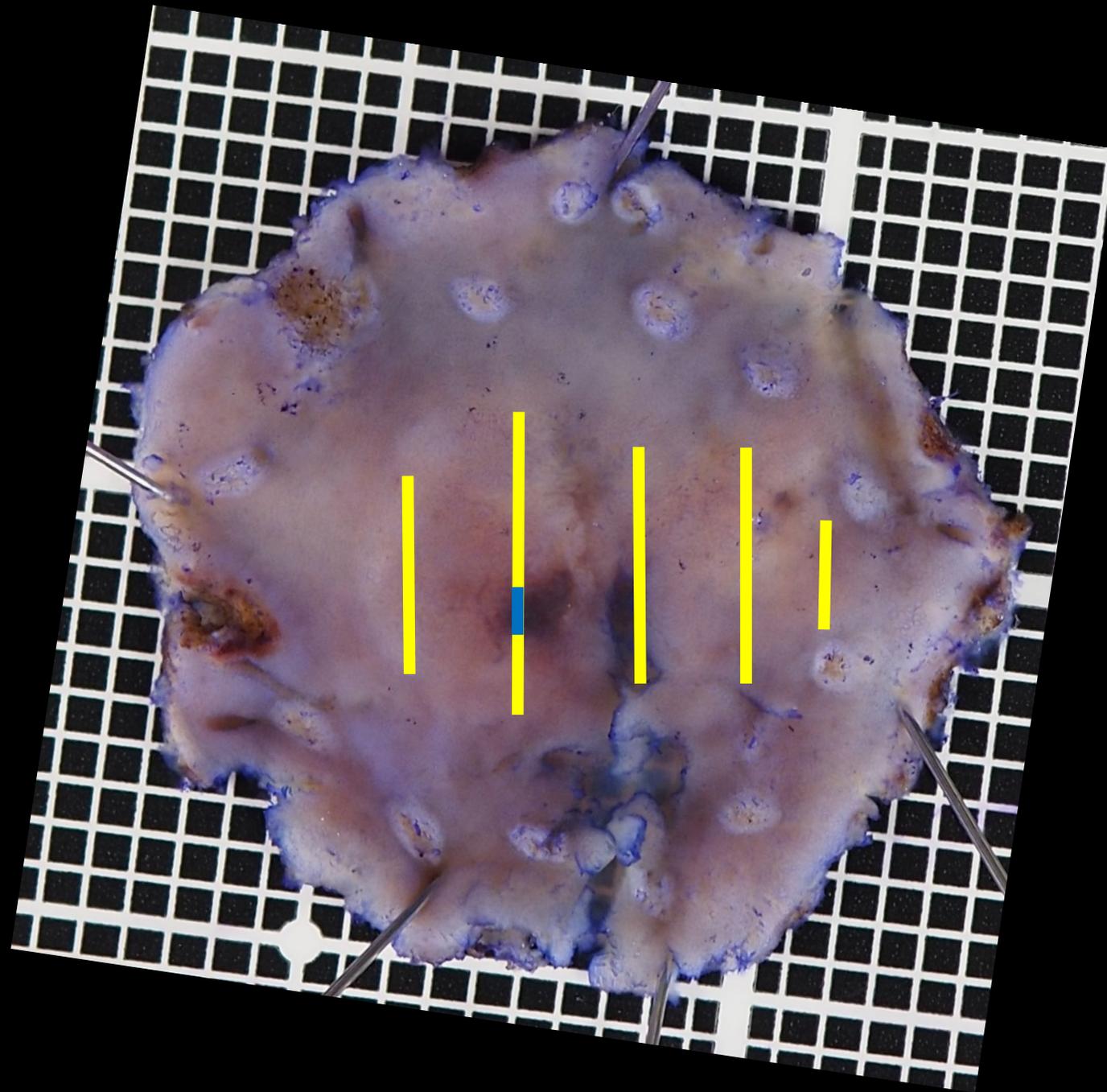
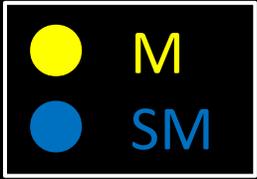






oral





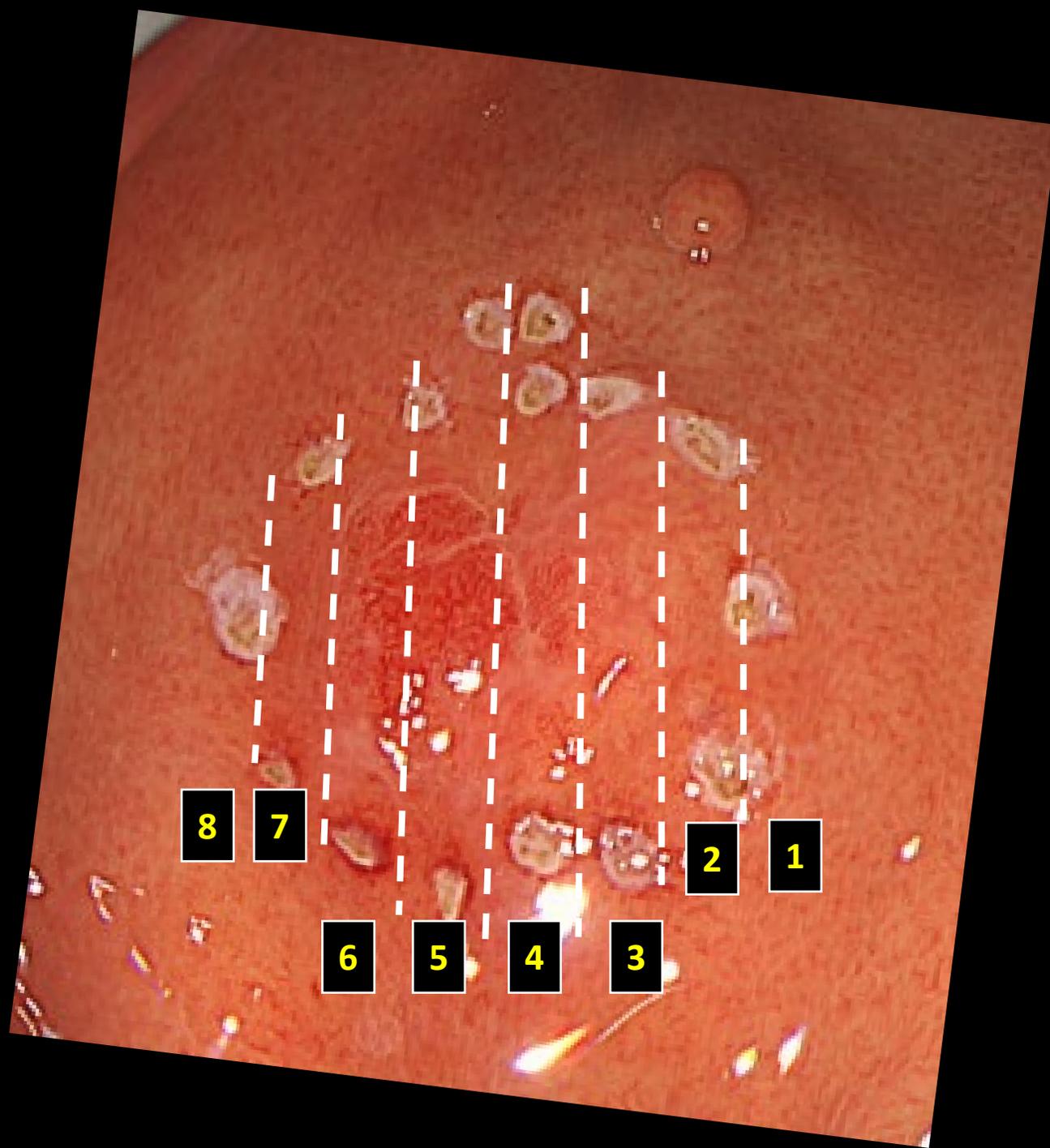
病理組織診断

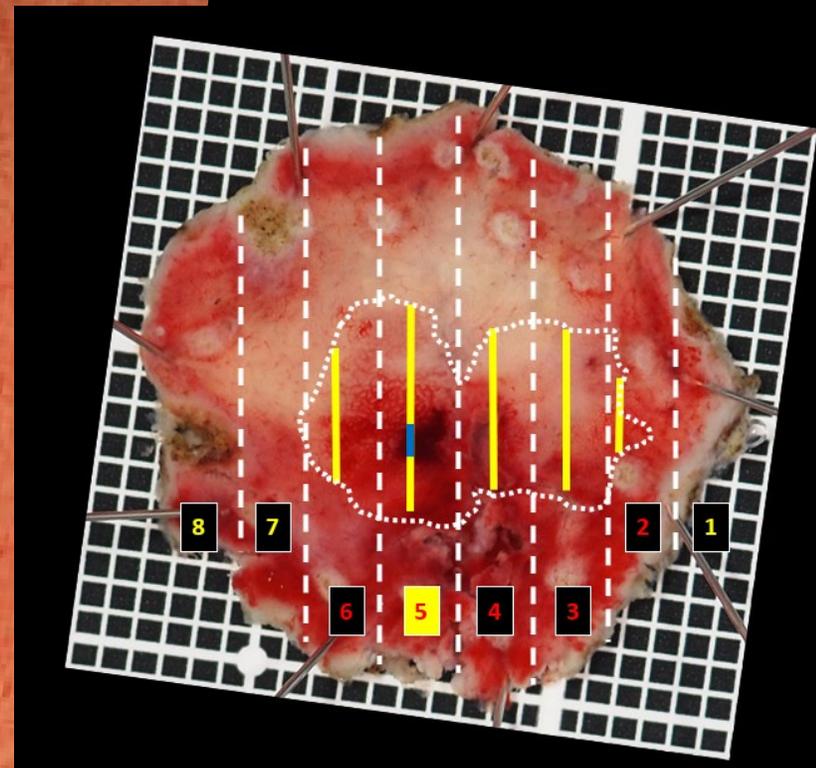
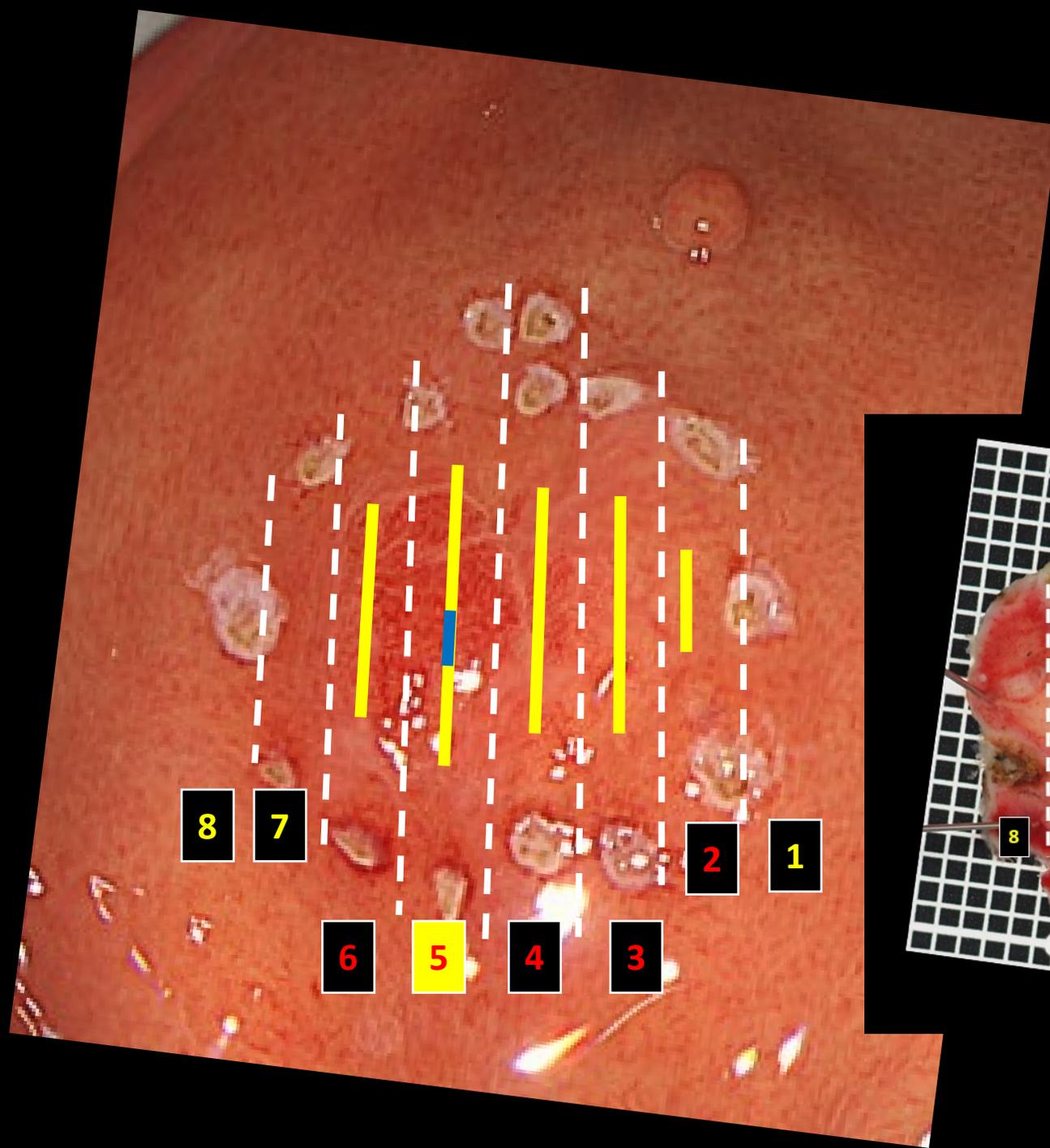
Stomach, ESD:

adenocarcinoma of fundic gland mucosa type,
pT1b2(SM2, 0.51mm), INFa, Ly0, V0,
UL0, pHM0, pVM0(0.07mm)

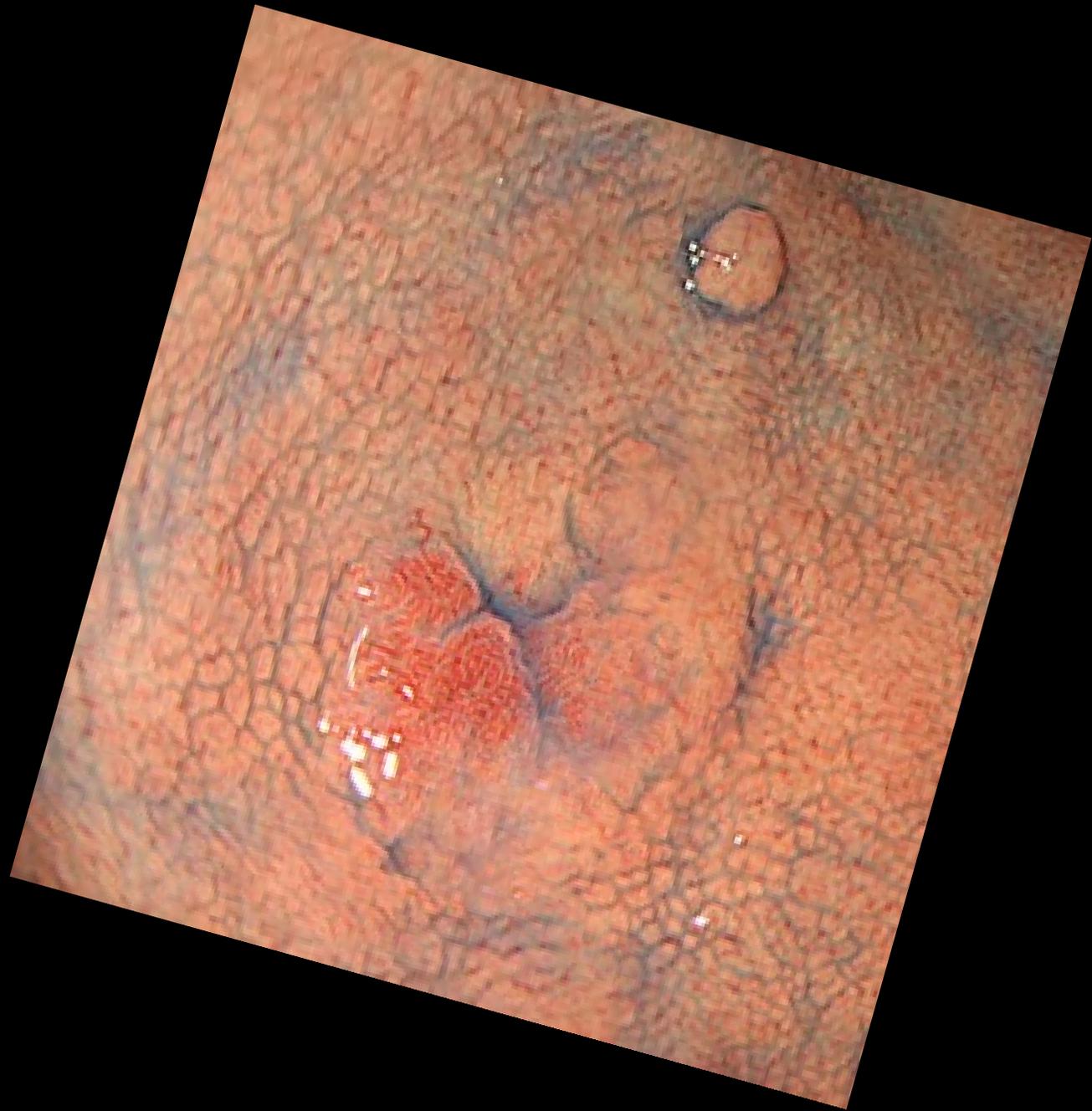
eCura C-2

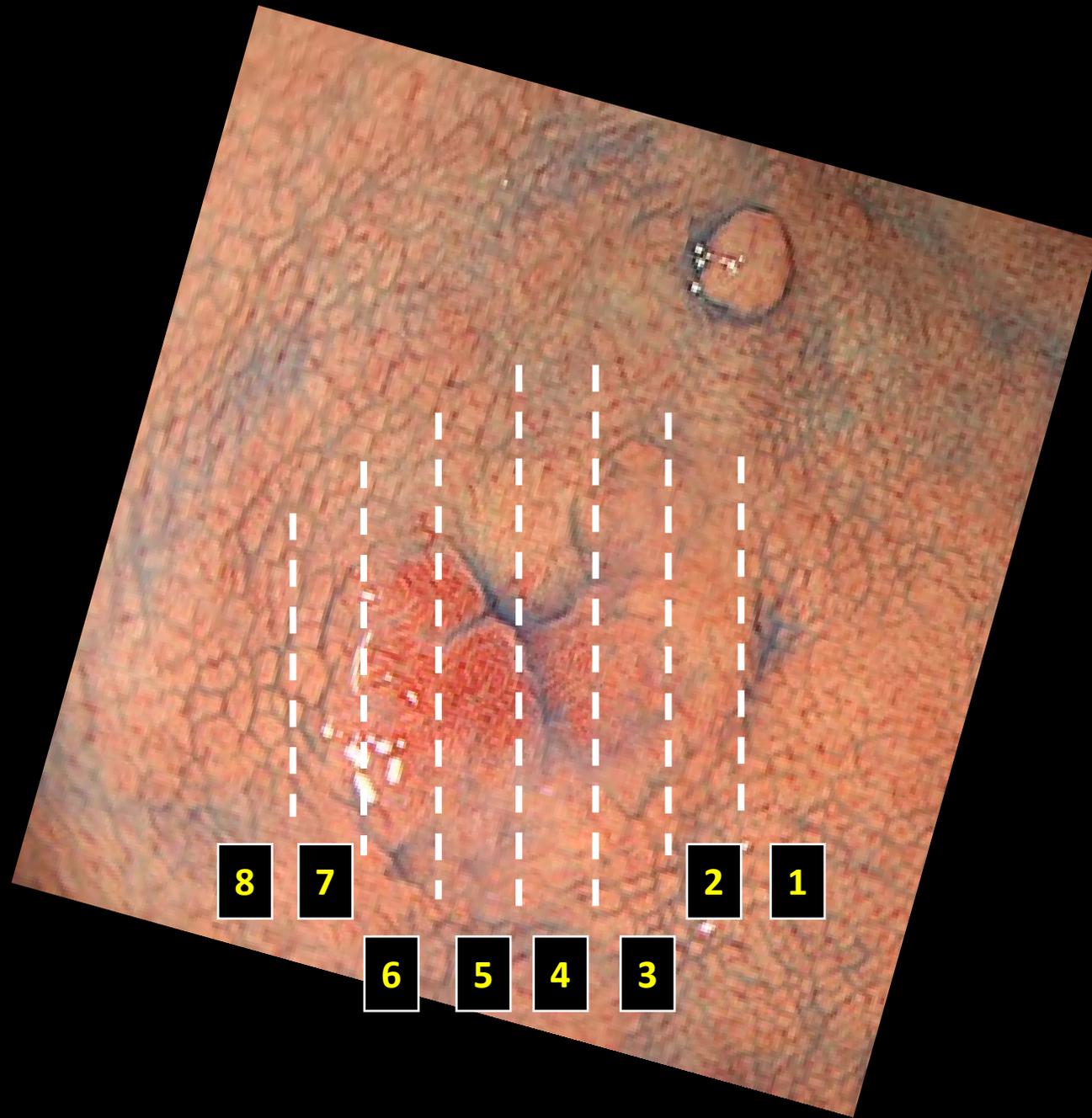


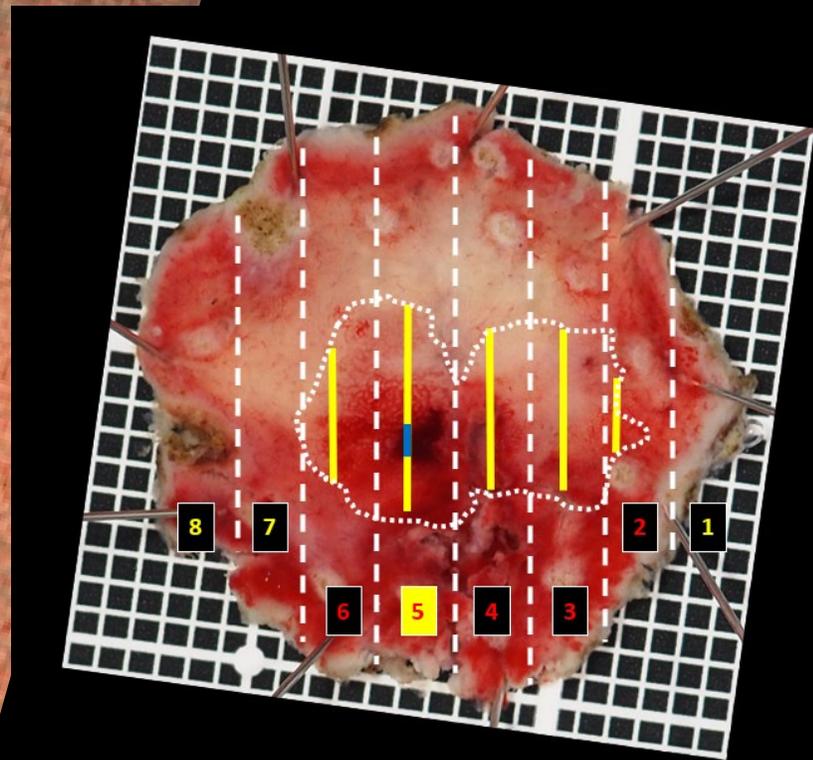
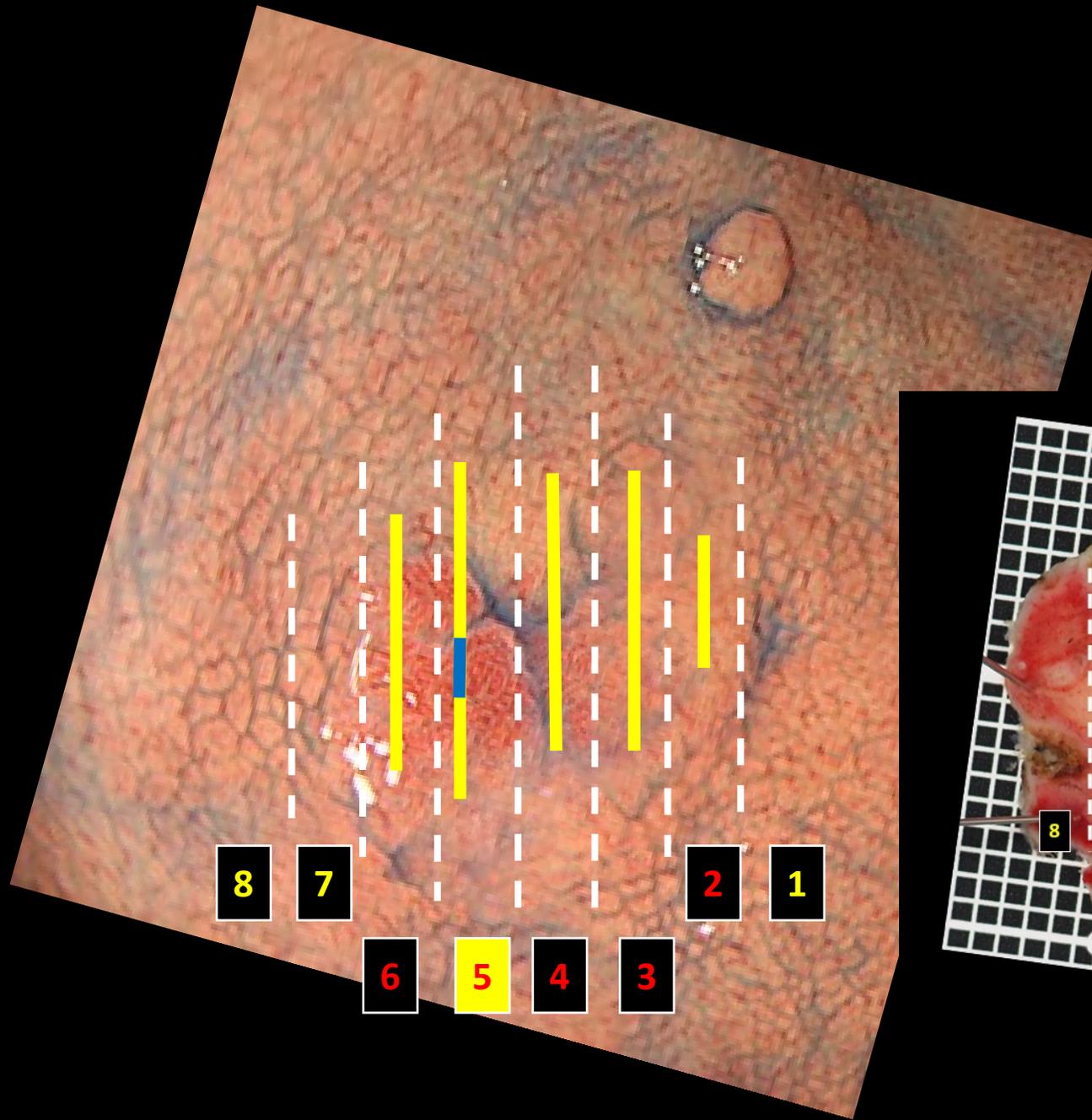


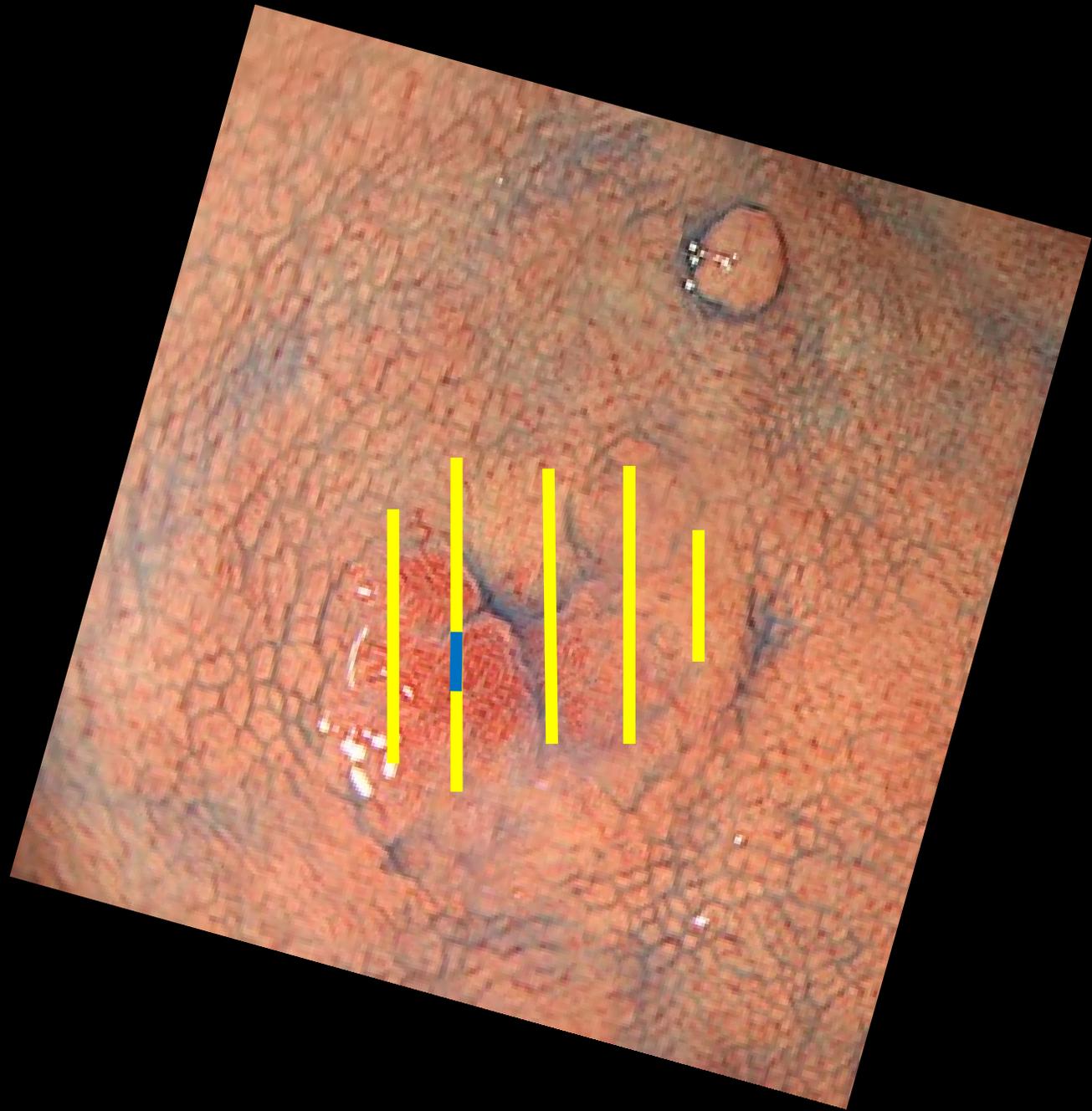


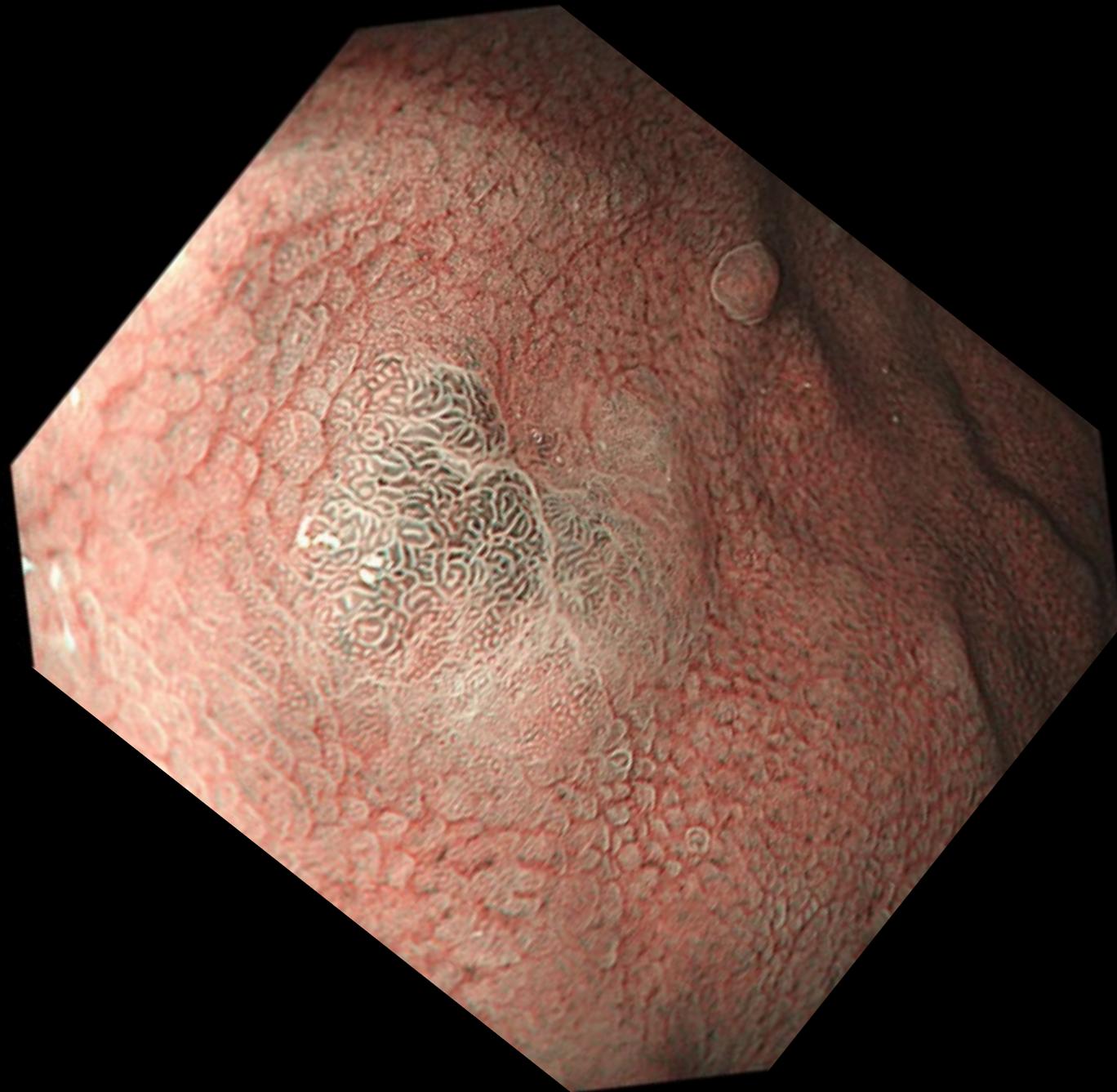




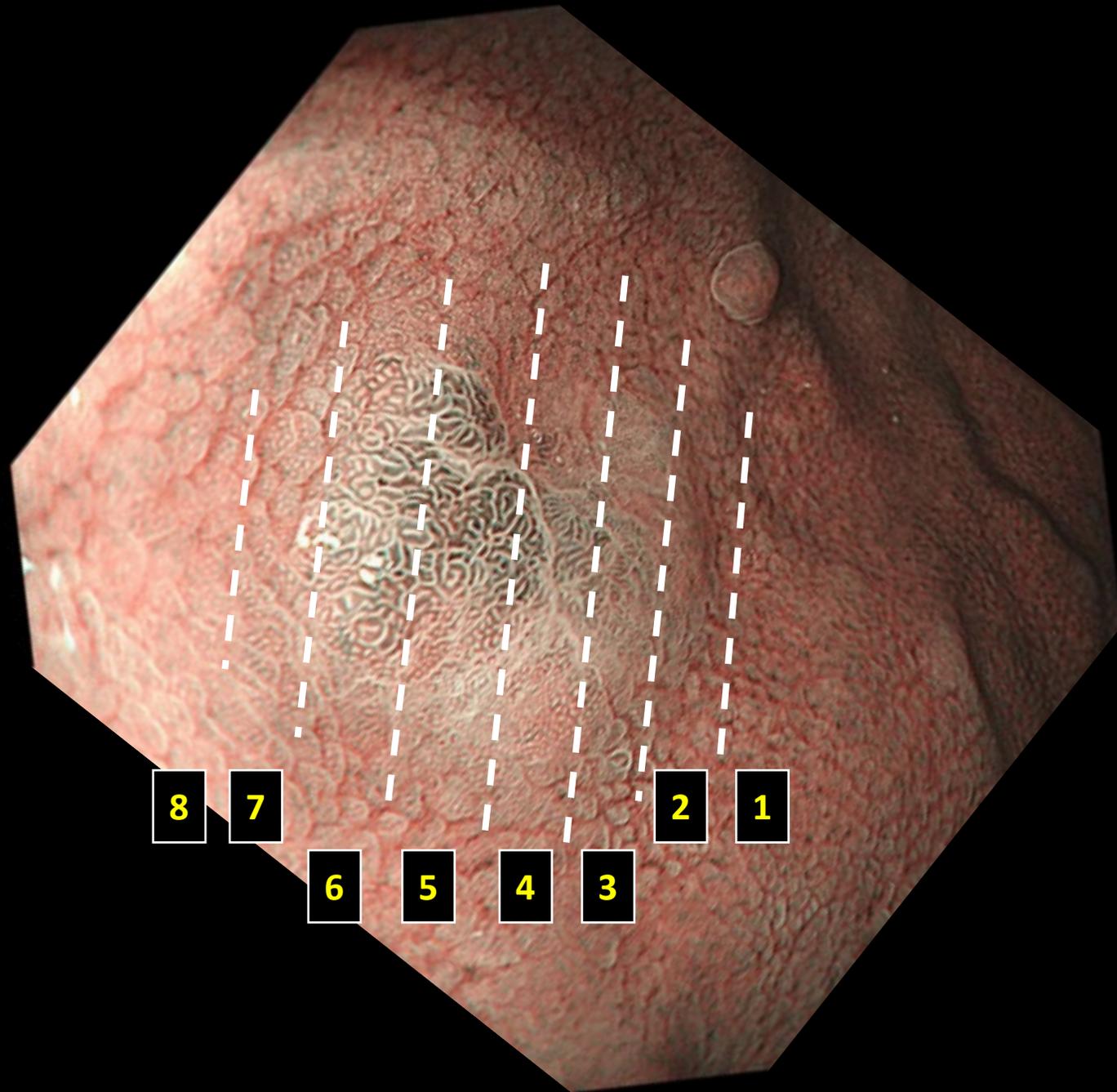








NRL



NBI

8

7

6

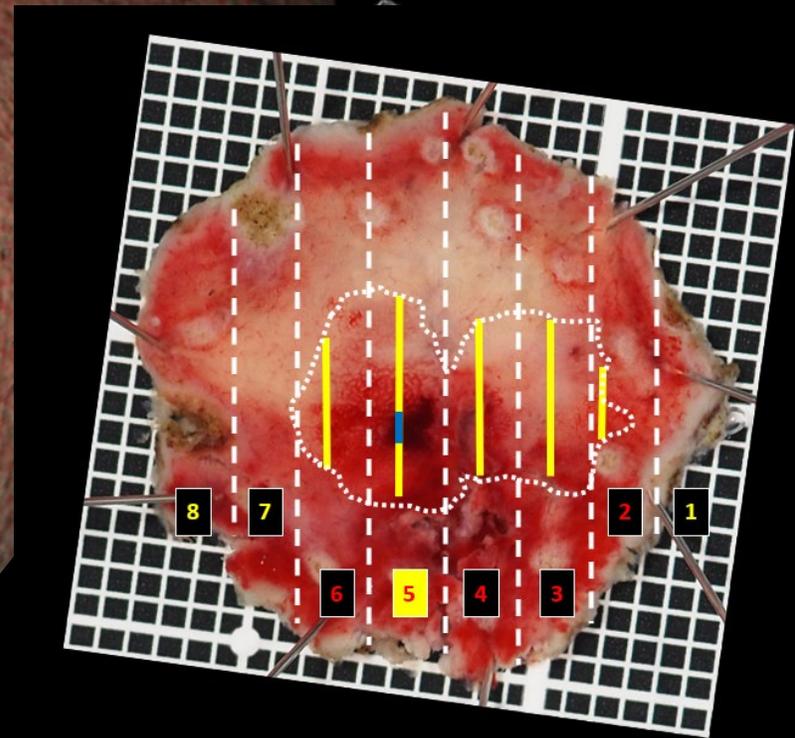
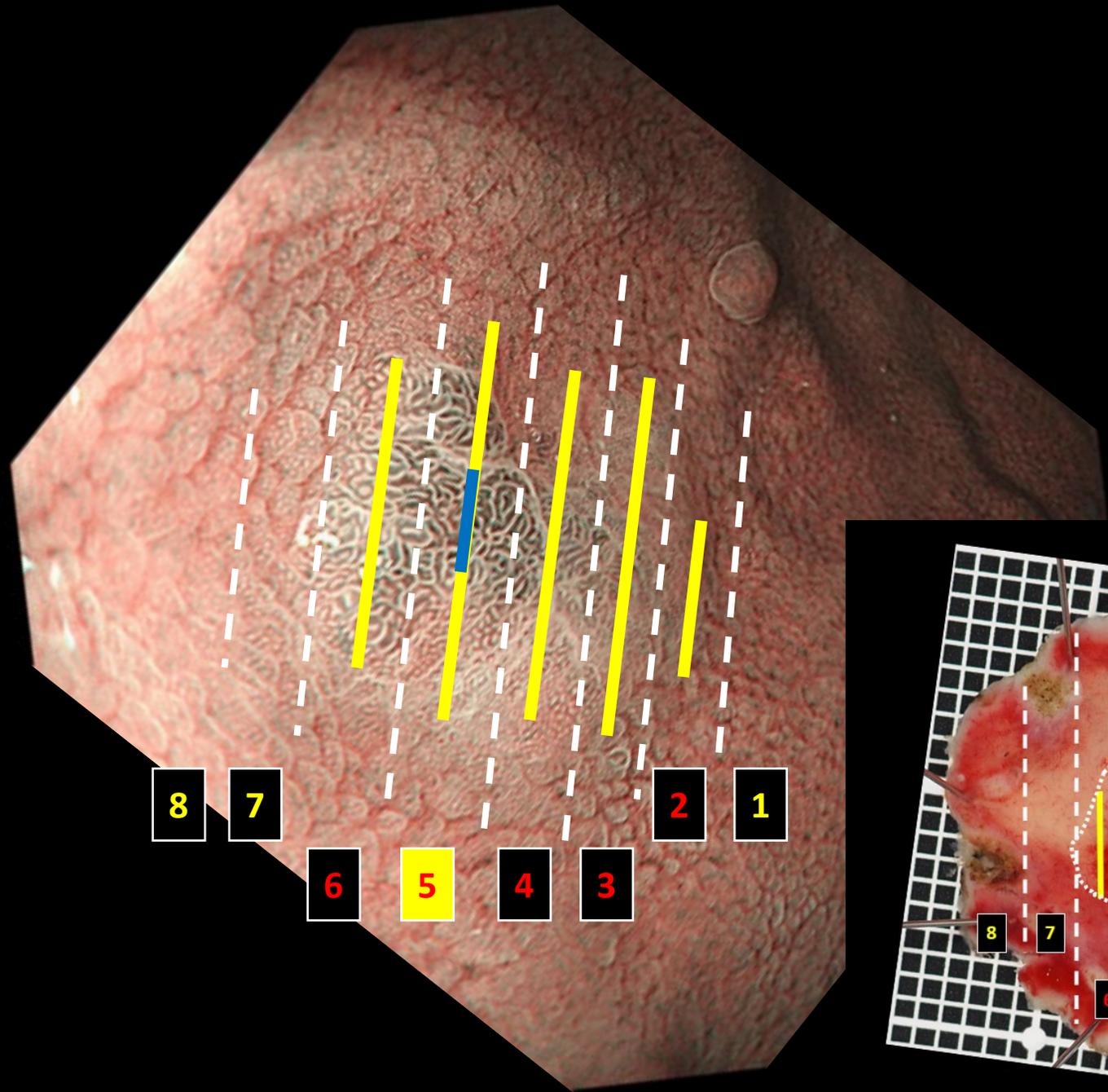
5

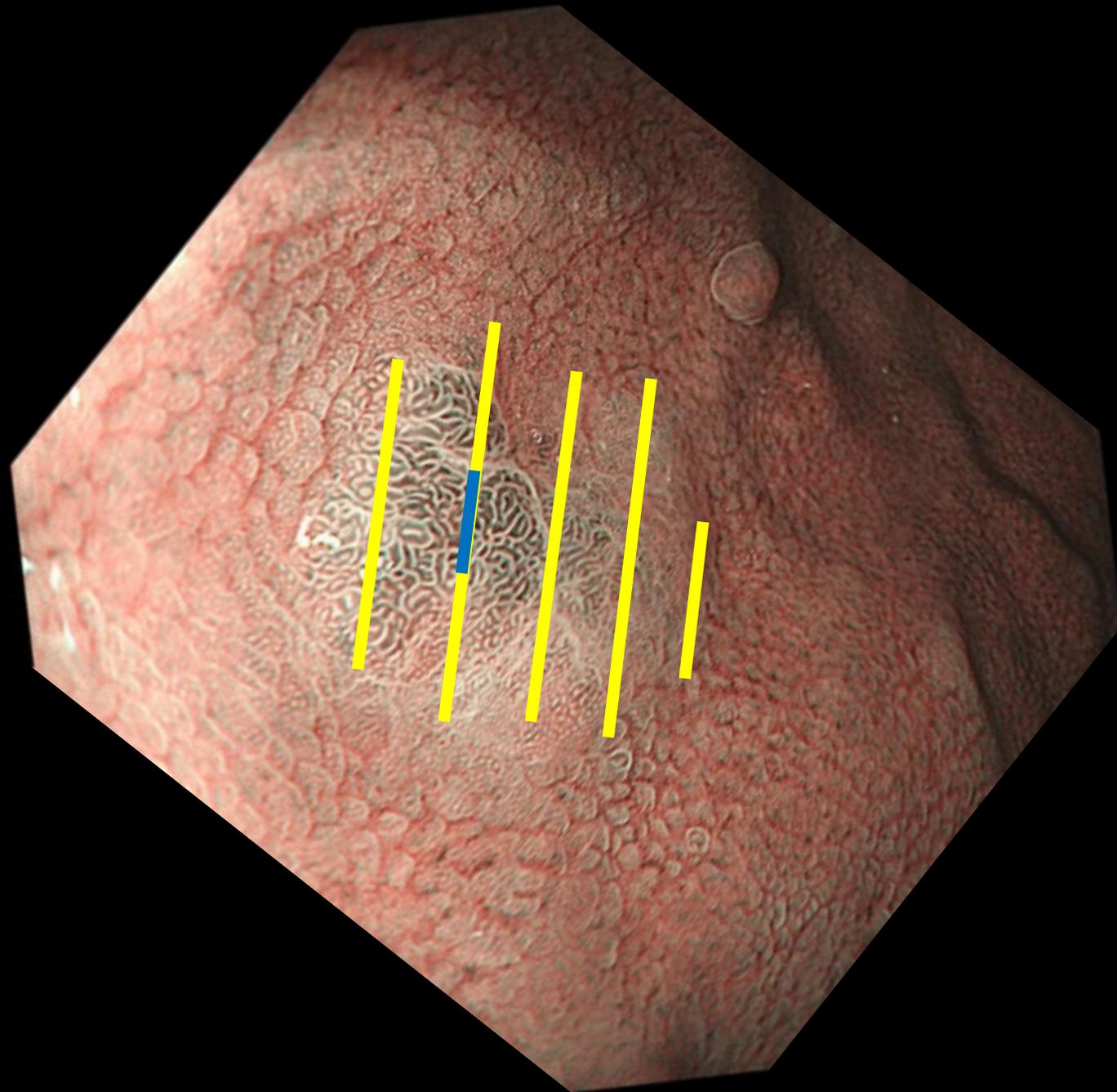
4

3

2

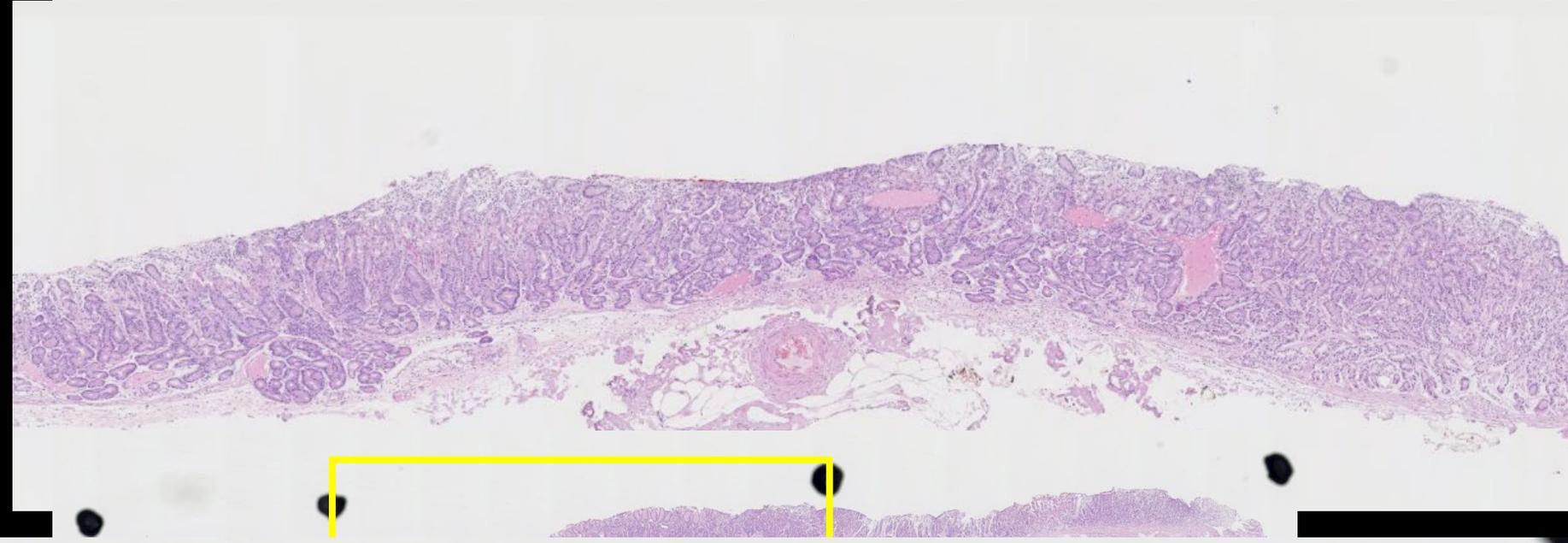
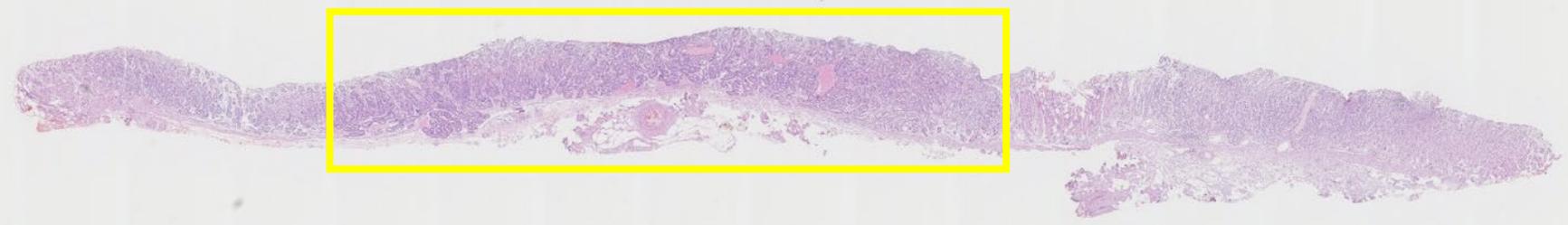
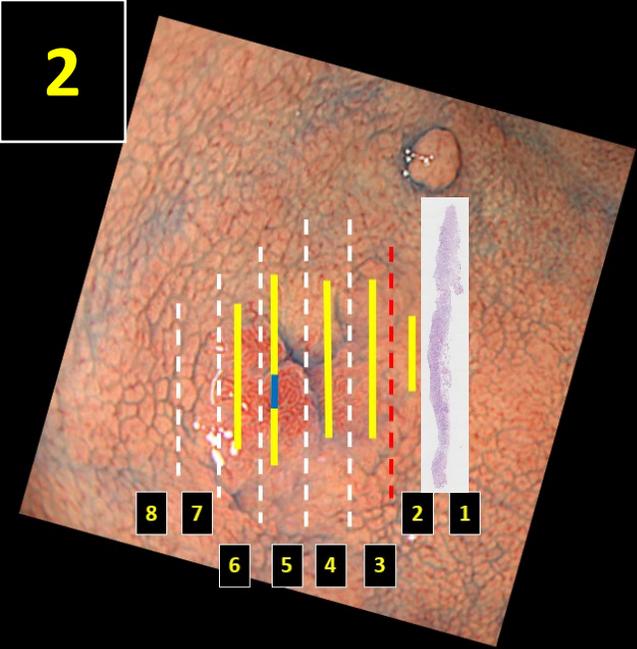
1



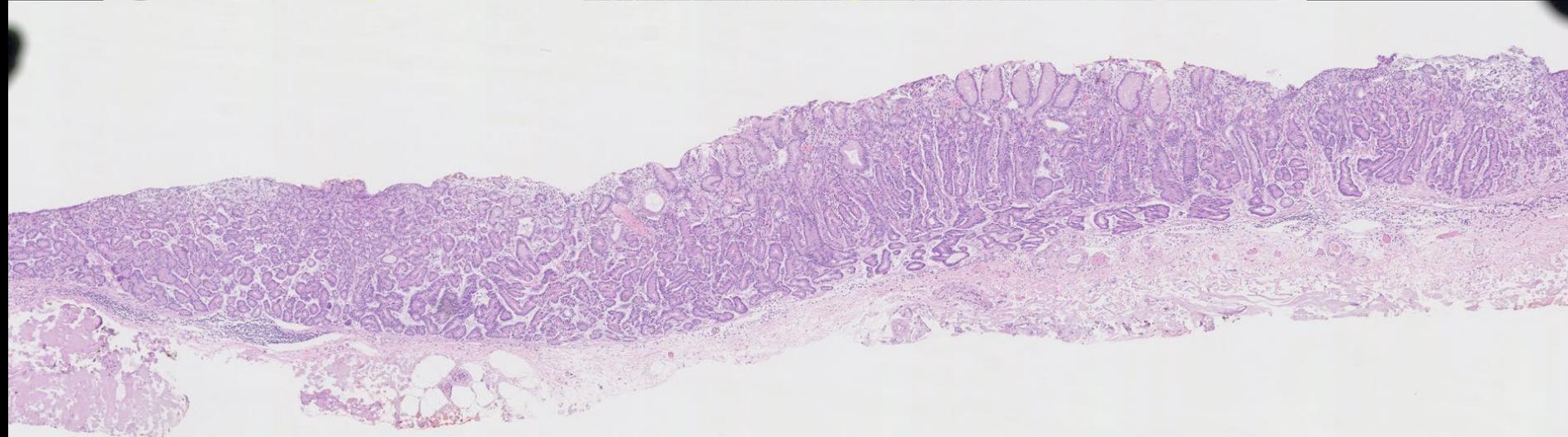
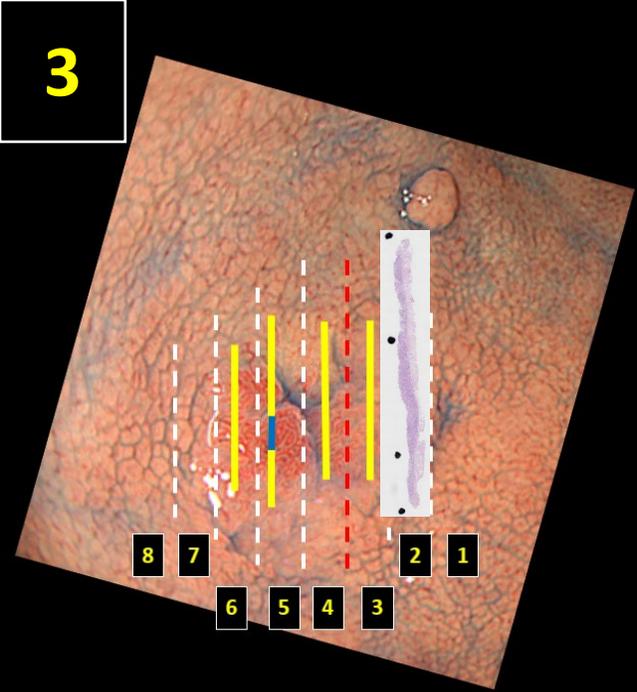


NBI

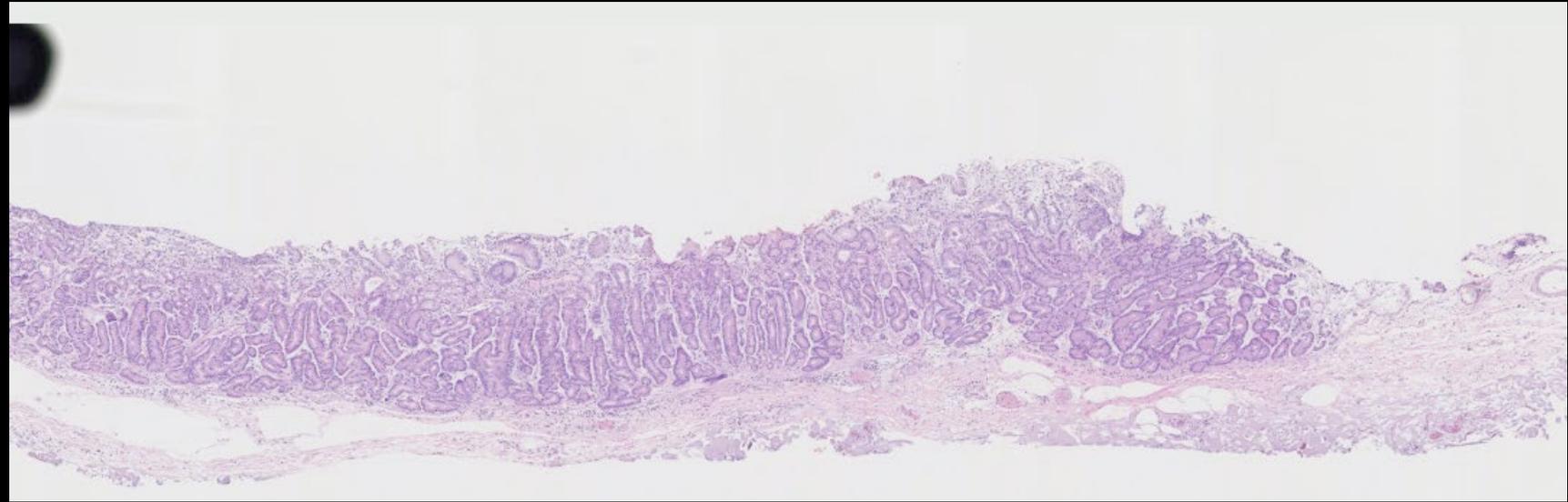
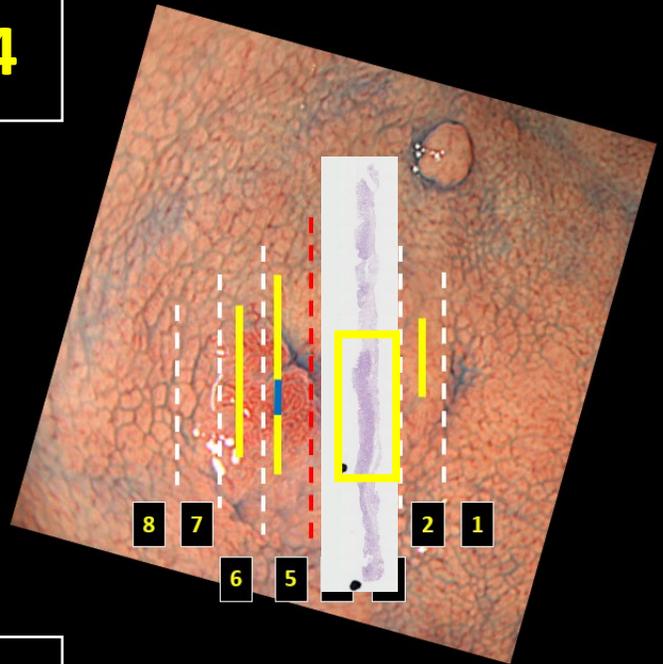
2



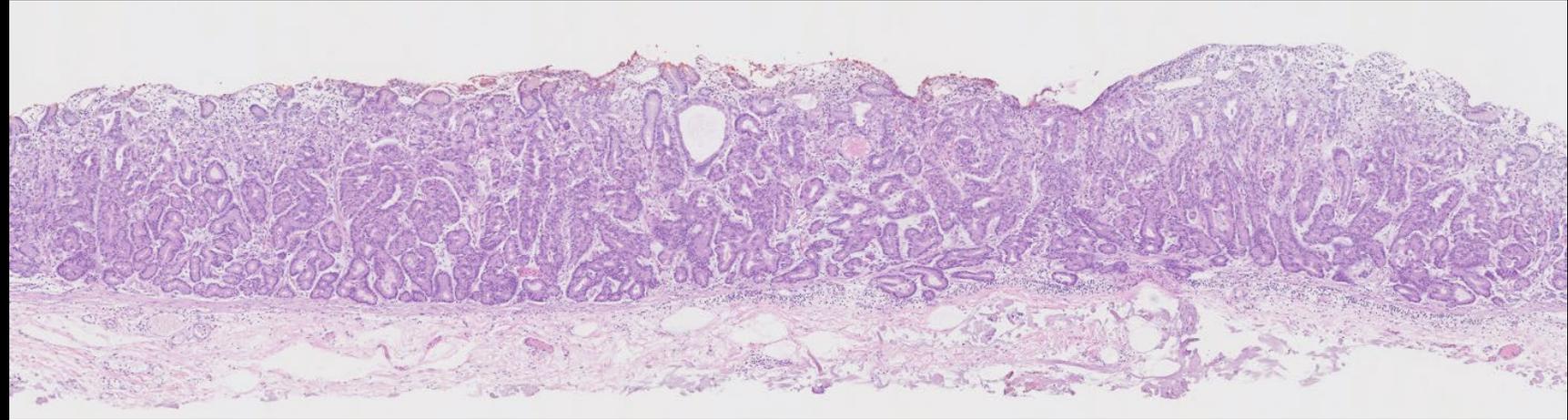
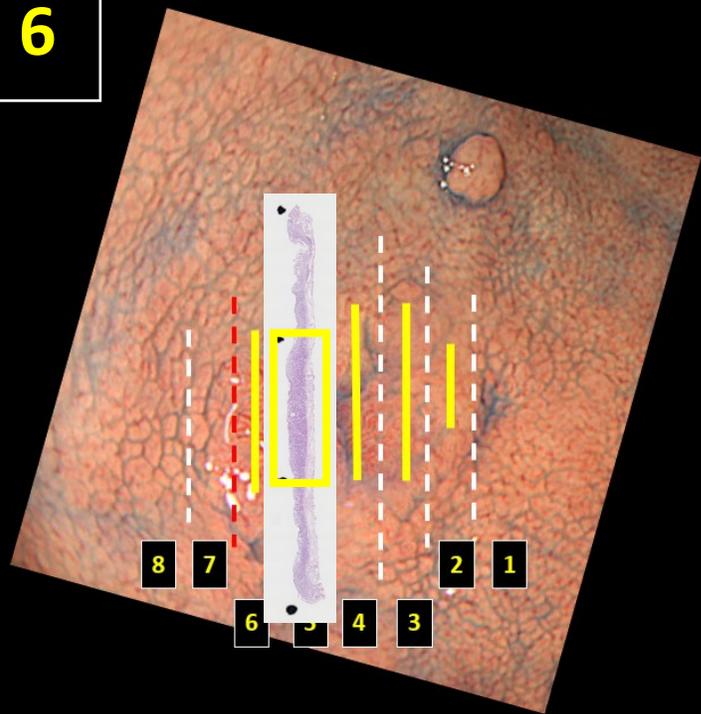
3



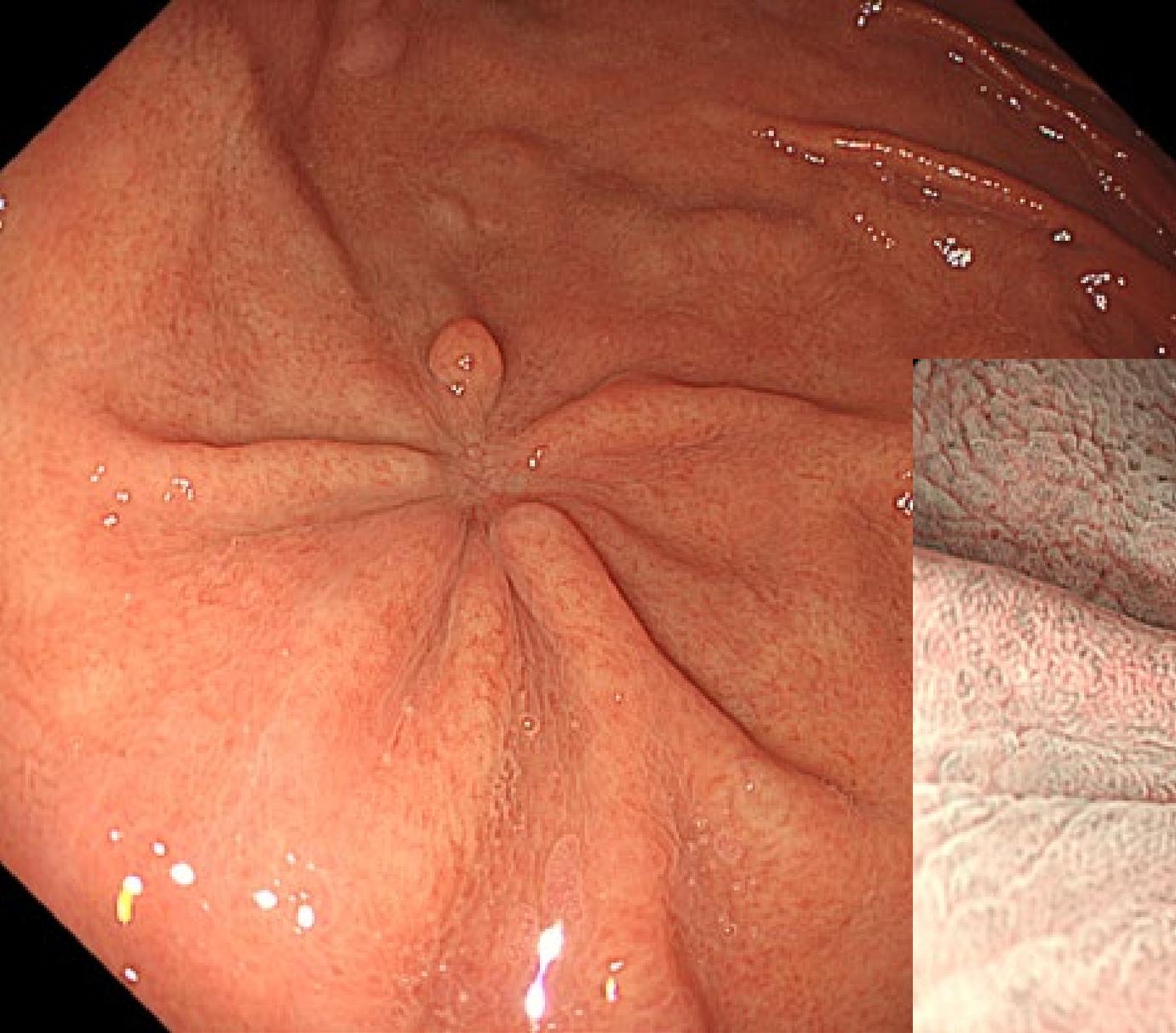
4



6



ESD 2ヶ月後

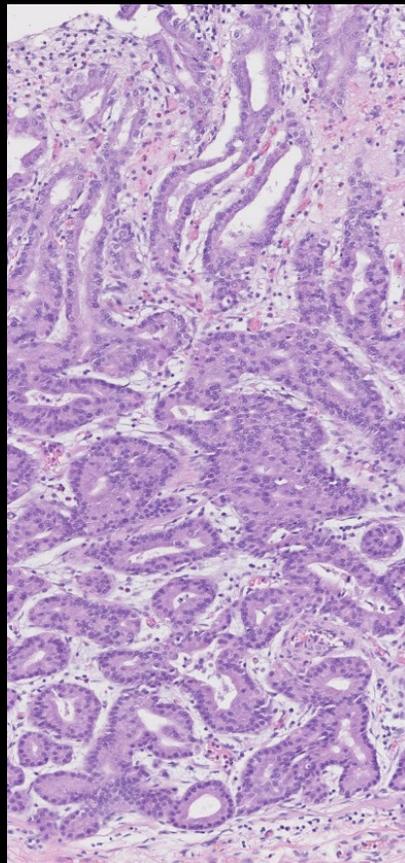


胃底腺型腺癌と胃底腺粘膜型腺癌

- ・胃底腺型腺癌は胃底腺(主細胞、壁細胞、頸部粘液細胞)方向に分化する低異型度分化型腺癌
- ・胃底腺粘膜型腺癌は胃底腺型腺癌の一組織型亜型で腺窩上皮細胞と胃底腺細胞への分化を示す

胃底腺型腺癌と胃底腺粘膜型腺癌

免疫染色マーカー



腺窩上皮への
分化を示す癌

腺窩上皮細胞 (MUC5AC)

胃底腺への
分化を示す癌

主細胞 (pepsinogen I)

壁細胞 (H⁺/K⁺-ATPase)

頸部粘液細胞 (MUC6)

胃底腺型腺癌

胃底腺粘膜型腺癌

	胃底腺型腺癌	胃底腺粘膜型腺癌
背景粘膜	H.Pylori未感染 胃に発生(現感染・既感染でも報告あり)	
特徴的な内視鏡所見	<ul style="list-style-type: none"> ・粘膜下腫瘍様隆起 ・拡張した樹枝状血管 ・腺開口部の開大 ・窩間部の開大 	
表面構造・微小血管構造	不整を認めにくい	不整の程度が強い
境界	不明瞭	比較的明瞭
色調・肉眼型	白色隆起>白色平坦/陥凹 >発赤隆起>発赤平坦/陥凹	発赤隆起>発赤平坦/陥凹 >白色隆起+平坦/陥凹
腫瘍径・SM浸潤距離	小	大
悪性度・脈管侵襲陽性率	低	高

■ 胃底腺型腺癌



■ 胃底腺粘膜型腺癌

