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Summary

HYBRID ENDOSCOPIC SUBMUCOSAL DISSECTION OF AN AMPULLARY NEUROENDOCRINE TUMOR VIA DUODENOSCOPE

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Hepatobiliary

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A 63-year-old male with an ampullary neuroendocrine tumor underwent successful hybrid endoscopic submucosal dissection via duodenoscope, achieving complete resection with negative margins.

KEY POINTS

- Histopathology confirmed a well-differentiated neuroendocrine tumor (G1) confined to the mucosal lamina propria and muscularis propria with negative resection margins
- The patient presented with a 2.1 cm x 2.3 cm ampullary mass and distal common bile duct calculus, with multidisciplinary team consensus to prioritize endoscopic over surgical resection
- Significant dissection challenges and bleeding during the procedure necessitated a shift from standard ESD to a hybrid ESD approach using GoldKnife and IT knife nano
- Biliary and pancreatic stents were placed to prevent stricture and pancreatitis, and 7 hemoclips were deployed to close the defect, with patient discharge on day seven
- This case supports the feasibility of endoscopic resection techniques for ampullary submucosal tumors as a less invasive alternative to surgery

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