



E-011

## A Case Report : Late Recurrence Of Ampulla Of Vater Cancer After Transduodenal Ampullectomy

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**Background** : Transduodenal ampullectomy(TDA) is a surgical procedure used to remove lesions from the ampulla of Vater. This procedure is typically indicated for benign or precancerous lesions, such as adenomas, that are localized and do not involve the surrounding tissues. It serves as a less invasive alternative to more extensive surgeries like pancreatoduodenectomy(PD). However, to the best of our knowledge, there have been few reports of Ampulla of Vater (AoV) cancer recurrence after a very long period TDA.

**Methods** : The 80-year-old woman was referred our department for surgical treatment. She underwent TDA for a mass in the mass 17 years ago. Pathologic report revealed high grade dysplasia with free resection margin. At that time, she also had left intrahepatic duct stones and multiple gallstones, so left lateral sectionectomy and cholecystectomy were also performed. 17 years after undergoing TDA, the patient suddenly experienced epigastric pain with febrile sense, prompting a visit to the gastroenterology department. An abdomen computed tomography(CT) scan was performed, which revealed a small mass at the AoV and showed signs of upstream biliary dilatation. An upper gastrointestinal endoscopy also revealed a mass at the AoV, and a biopsy was performed, and adenocarcinoma was diagnosed. All imaging study revealed no definite distant metastasis. She successfully underwent laparoscopic pylorus preserving pancreatoduodenectomy and was discharged without major postoperative complications.

**Results** : The pathology report revealed a moderately differentiated adenocarcinoma at the AoV measuring 3.5x2.5 cm. All resection margins were free of tumor. The common bile duct and pancreas was found to have adenocarcinoma due to direct invasion from cancer. Among the 21 regional lymph nodes, 4 were positive for metastatic adenocarcinoma. Postoperatively, she received six cycles of chemotherapy with gemcitabine. However, six months later, follow-up imaging revealed hepatic metastasis. The patient declined further chemotherapy and follow-up examinations, opting instead for regular outpatient visits to monitor her condition. She is currently alive 20 months after the surgery."

**Conclusions** : Despite successful initial surgery and postoperative recovery, the patient experienced a very late recurrence of AoV cancer more than a decade after the procedure. This case underscores the importance of long-term follow-up and monitoring in patients who have undergone TDA, as the risk of cancer recurrence, although rare, remains present even many years after the initial treatment.

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