

胃神经内分泌肿瘤的临床病理特征及内镜表现

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Title: Clinical pathological features and endoscopic presentation of gastric neuroendocrine neoplasms

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摘要: 目的: 探讨胃神经内分泌肿瘤(gastric neuroendocrine neoplasms, gNEN)临床病理特征及内镜表现。方法: 回顾性分析2014年1月至2016年1月河南省人民医院行内镜活检并病理诊断为gNEN的40例患者临床资料, 探讨其临床病理学特征及内镜表现。结果: 40例gNEN患者的临床表现多为非特异性症状, 仅1例伴有反复腹泻的类癌综合征表现; 病变部位最常见于胃体(20/40, 50%); 大体分型以隆起型为主17例(42.5%); 病理分型中NET 17例(42.5%), NEC 22例(55.0%), MANEC 1例(2.5%), 不同性别gNEN患者的病理分型差异无统计学意义。突触素(Synaptophysin, Syn)染色阳性38例(95.0%), 嗜铬颗粒A(chromogranin A, CgA)染色阳性25例(62.5%); NET、NEC组织中Syn阳性率均高于CgA阳性率, 具有统计学意义; I型gNEN 17例(42.5%), II型3例(7.5%), III型20例(50.0%); 行内镜下EMR/ESD模式治疗的13例(32.5%), 活检后采用单纯手术治疗的6例(15.0%), 手术并辅助化疗的18例(45.0%), 3例(7.5%)明确诊断时已有远处转移仅行姑息治疗。结论: gNEN发病率逐年上升, 临床医生应熟悉该肿瘤的临床病理特征及其内镜下的表现, 做到早期诊断, 明确病理分期并规范个体化治疗。

Abstract: Objective: To investigate the clinical manifestations, endoscopic and pathological features of gastric neuroendocrine neoplasms (gNEN). Methods: We retrospectively analyzed 40 patients with a pathological diagnosis of gNEN from January 2014 to January 2016. Their clinical presentation, endoscopic features, microscope and tissue morphology, and treatment were reviewed. Results: One of the 40 cases was accompanied by clinical features of carcinoid Syndrome. The other patients were with nonspecific symptoms of digestive tract. The lesions were more often located on the gastric body (20/40, 50%). There were 17 cases of neuroendocrine tumor (NET), 22 cases of neuroendocrine carcinoma (NEC), 1 case of mixed adenocarcinoma (MANEC). The positive rates of Syn and CgA were 95.0% and 62.5%, and the differences were statistical significance ($P < 0.05$). Seventeen cases were type I gNEN, three cases were type II, and twenty cases were type III. Thirteen subjects were treated only with endoscopic mucosal resection (EMR) or endoscopic submucosal dissection (ESD). A partial or total gastrectomy was done in twenty-four patients, and eighteen cases of which were followed by adjuvant chemotherapy. Three cases had distant metastasis when diagnosed, only palliative treatment was administered. Conclusions: The incidence of gNEN was increased greatly in recent years. Clinicians should be familiar with clinical pathological features and endoscopic characteristics of this disease surgical treatment or EMR/ESD depending on the extension of the disease. Early diagnosis and individual treatment is very important for the patients. Correct early diagnosis is attainable by using endoscopy, histopathologic characteristics, and should precede any treatment.

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