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Early Gastric Cancer Accompanied with a Giant Metastatic Abdominal Lymph Node

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Lymph node metastasis is found in 10-15% of patients with early gastric cancer; however, metastatic nodes forming giant abdominal masses or distant metastases are extremely rare. A 51-year-old male, HBs Ag-positive patient presented with an incidentally found huge upper abdominal mass. Imaging studies showed a 7 cm-sized epigastric mass consistent with hepatocellular carcinoma. His serum α -fetoprotein level was also significantly elevated (330.6 ng/ml). Endoscopic studies revealed a suspicious early gastric carcinoma located on the lesser curvature and the anterior wall of the antrum. He was operated on with a preoperative diagnosis of hepatocellular carcinoma coexisting with an early gastric carcinoma. However, the actual abdominal tumor was a metastatic lymph node resulting from a gastric carcinoma which was located around the hepatic artery. Accordingly, he underwent a subtotal gastrectomy with the D2 lymph node dissection and the removal of the metastatic node. Postoperatively, he did well without any complications. His serum α -fetoprotein level decreased to 49.3 ng/ml one week after the surgery and was completely normalized 3 months later. To date, one year and 4 months after the operation, he is in good conditions without evidence of recurrence on endoscopic and imaging studies. (J Korean Surg Soc 2002;63:167-170)

Key Words: EGC, lymph node metastasis, α -fetoprotein

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10% 15% (1-3)
 가 5 91 96%
 가 83 85%
 (3-5)
 (hepatocellular carcinoma)
 (double primary cancer) (6)

: , 51
 :
 : HBV
 가 : - , - HBV
 : 가
 가
 7×6 cm 가
 가
 : 14.5 g/dL,
 297,000 μ L
 AST가 55 U/L, ALT가 68 U/L 가
 , 4.04 g/dl, alkaline phosphatase 160
 U/L . -FP(-
 , - fetoprotein) 가 330.6 ng/ml 가 ,
 CA 19-9 CEA . HBsAg ,
 anti-HBV anti-HCV .

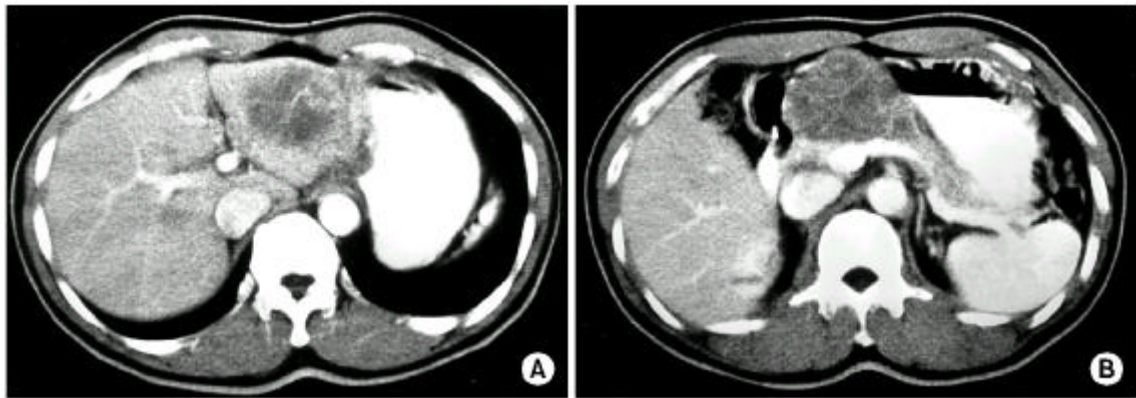


Fig. 1. (A) In this abdominal CT scan, a heterogeneously low density mass is seen on the left lateral segment of the liver. (B) The mass is exophytic and displaces the pancreas downwards.

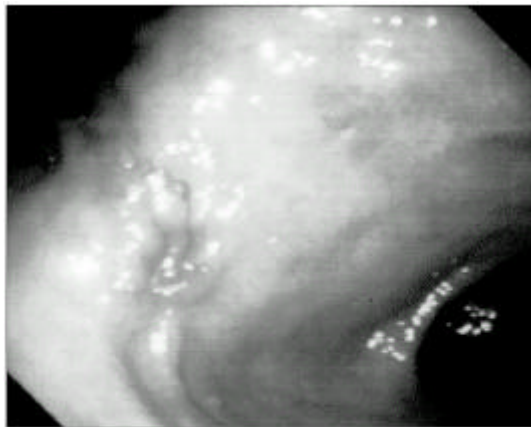


Fig. 2. A 0.6 cm-sized depressed erosion is found at the anterior wall, lesser curvature side of gastric angle. Biopsy of this lesion revealed focally marked atypism, suggesting an early gastric cancer.

hepatic ligament) : (gastro-
8×5 cm
가 , 가
7×6×6 cm
가 - (gastrohepatic ligament)

(atypism)
가 .
(exophytic) ,
:
(8)
(Fig. 3). 가
(encasement)
가 가 .
, Billroth-II D2
1.0 cm
IIC . 8×6×6
cm
(capsule)
(Fig. 4).
:
. Lauren
23 1
. AJCC (7)
pT1N1M0 stage IB .
:
(focally positive)
Ki67
가 (Fig. 2). (> 50%) , p53, CEA, EGFR . E-

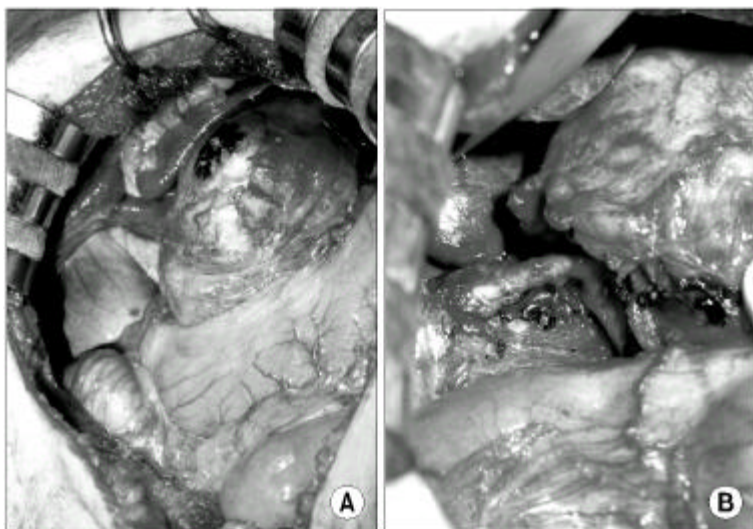


Fig. 3. (A) An adult's fist-sized round well encapsulated mass is found among the left lateral segment of liver, the lesser curvature of stomach and the pancreas. (B) Further dissection allowed the separation of the mass from the closely abutted common hepatic artery.

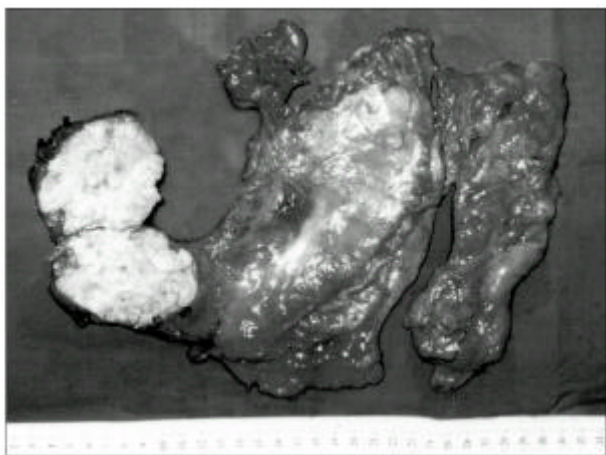


Fig. 4. On gross finding, this mass is solid, well encapsulated and is clearly separated from the stomach.

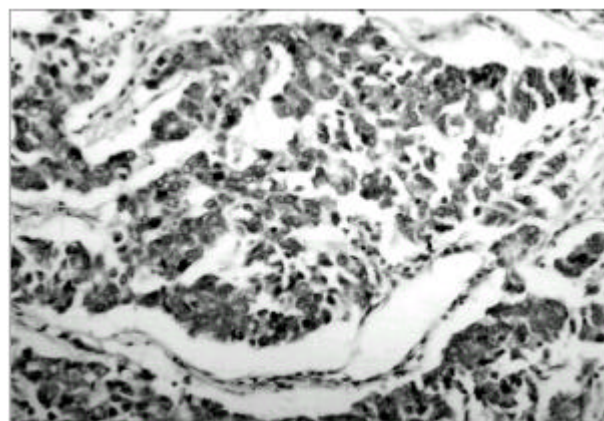
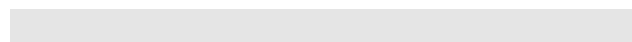


Fig. 5. Immunohistochemical staining of the metastatic giant lymph node. Strong expression of α -fetoprotein is noted ($\times 400$).

erbB-2 nm23
-FP 330.6 ng/ml 1 49.3 ng/ml

cisplatin-based 6 cycle
3 -FP 7.1 ng/ml
16 6

(9) (10)
(11) 가 B
가 -FP 330.6
ng/ml 가



(8)
10 15%
1 가

(double primary cancer)
Ando (12) 가
(leiomyosarcoma)

8
(9)
- (-fetoprotein positive gastric cancer)
5.4%, 2.1% (13)
- . Chang (13)
- 72%
2 . Kubota
(14) -
5 가 6
-FP
1900 ng/ml 가 .
-FP 가 .
(endoscopic mucosal resection), (wedge resection),
(limited resection without lymphadenectomy) (15,16)
(17)
가

REFERENCES

- 1) Seto Y, Nagawa H, Muto T. Impact of lymph node metastasis on survival with early gastric cancer. *World J Surg* 1997;21:186-9.
- 2) Kim JP, Hur YS, Yang HK. Lymph node metastasis as a significant prognostic factor in early gastric cancer: analysis of 1136 early gastric cancers. *Ann Surg Oncol* 1995;2:308-13.
- 3) Park IS, Lee YC, Kim WH, Noh SH, Lee KS, Kim H. Clinicopathologic characteristics of early gastric cancer in Korea. *Yonsei Med J* 2000;41:607-14.
- 4) Hanazaki K, Wakabayashi M, Sodeyama H, Makiuchi A, Igarashi J, Yokoyama S, et al. Surgical outcome in early gastric cancer with lymph node metastasis. *Hepatogastroenterology* 1997;44:907-11.
- 5) Ha TW, Kim IH, Sohn SS. Analysis of prognostic factors and outcome of early gastric cancer with and without lymph node metastasis. *J Korean Surg Soc* 2001;60:413-9.
- 6) Chen CN, Lee PH, Lee WJ, Chang KJ, Chen KM. Synchronous hepatocellular carcinoma or metastatic hepatic tumor with primary gastric cancer. *Hepatogastroenterology* 1998;45:492-5.
- 7) American Joint Committee on Cancer. *AJCC Cancer Staging Manual*. 5th ed. Philadelphia, PA: Lippincott-Raven Publishers; 1997.
- 8) Isozaki H, Tanaka N, Okajima K. General and specific prognostic factors of early gastric carcinoma treated with curative surgery. *Hepatogastroenterology* 1999;46:1800-8.
- 9) Haraguchi M, Korenaga D, Okamura T, Tsujitani S, Sigimachi K. A small early carcinoma of the stomach with extra-perigastric lymph node metastasis: a case report. *Jpn J Surg* 1990;20:111-4.
- 10) Hirono M, Suehiro S, Hirai T, Nimoto M, Hattori T. Early gastric cancer with widespread lymph node metastasis: a case report. *Jpn J Surg* 1984;14:143-5.
- 11) Nakata Y, Watanabe Y, Nakata T, Kimura K, Sato M, Kawachi K. Early gastric cancer associated with synchronous liver metastasis and portal tumorous embolism: report of a case. *Surg Today* 1998;28:753-7.
- 12) Ando M, Hachisuka K, Yamaguchi A, Isogai M, Ishibashi H, Kato J, et al. A case of early gastric cancer forming a large abdominal tumor from a lymph node metastasis. *Gan No Rinsho* 1988;34:89-96.
- 13) Chang Y, Nagasue N, Abe S, Taniura H, Kumar D, Nakamura T. Comparison between the clinicopathologic features of AFP-positive and AFP-negative gastric cancers. *Am J Gastroenterol* 1992;87:321-5.
- 14) Kubota O, Suzuki T, Takahashi T, Kosukegawa M, Yamashita K, Mori S, et al. A case of AFP-producing early gastric carcinoma with rapid growth liver metastasis. *Hepatogastroenterology* 2001;48:1206-8.
- 15) Hochwald S, Brennan M, Klimstra D, Kim S, Karpeh M. Is lymphadenectomy necessary for early gastric cancer? *Ann Surg Oncol* 1999;6:664-70.
- 16) Tsujitani S, Oka S, Saito H, Kondo A, Ikeguchi M, Maeta M, et al. Less invasive surgery for early gastric cancer based on the low probability of lymph node metastasis. *Surgery* 1999;125:148-54.
- 17) Maehara Y, Orita H, Okuyama T, Moriguchi S, Tsujitani S, Korenaga D, et al. Predictors of lymph node metastasis in early gastric cancer. *Br J Surg* 1992;79:245-7.