

Endoscopic resection of ectopic pancreas in the minor papilla



Fig. 1 A hard mass with normal-appearing overlying mucosa was found in the minor papilla area.



Fig. 2 Endoscopic ultrasound image of lesion.

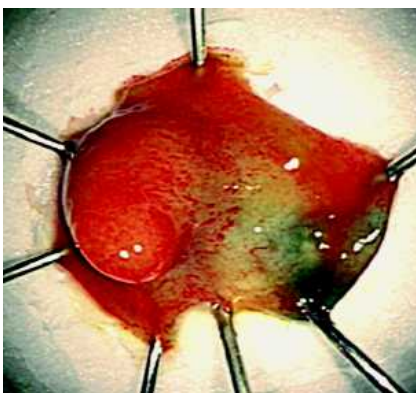


Fig. 3 The lesion was removed by endoscopic mucosal resection.

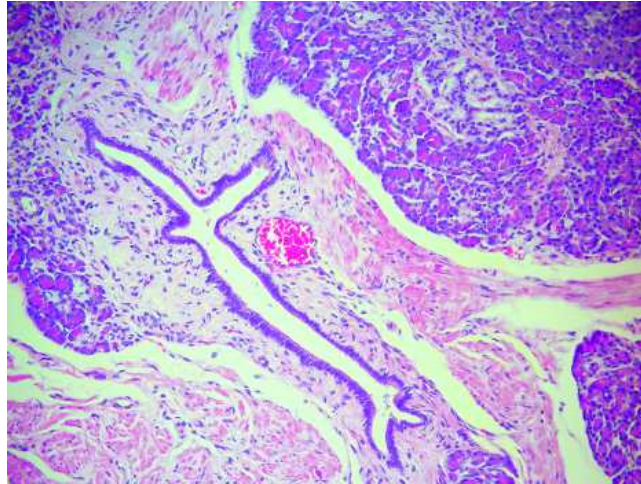


Fig. 4 The lesion was composed of pancreatic acini, ducts, and foci of Langerhans islets, consistent with ectopic pancreas (hematoxylin and eosin stain, $\times 200$).

A 50-year-old Korean man underwent upper endoscopy in our hospital for the evaluation of dyspepsia. He had no significant medical history and was taking no medication.

He was found to have a hard mass with normal-appearing overlying mucosa on the minor papilla area just proximal to the normal major papilla (▶ **Fig. 1**). Back-to-back duodenoscopy showed the lesion as more prominent. Endoscopic ultrasonography (EUS) was carried out to further evaluate the lesion. Using a 12-MHz transducer, a five-layered gastric wall structure was imaged. EUS revealed a round hypoechoic inhomogeneous lesion, with a few anechoic structures inside, originating from the submucosal layer (▶ **Fig. 2**). The lesion was measured as 9.5×5.0 mm in size.

The lesion was successfully removed with a snare by endoscopic mucosal resection (▶ **Fig. 3**). Microscopic examination revealed the mass to be composed of pancreatic acini, ducts, and foci of Langerhans islets, consistent with ectopic pancreas (▶ **Fig. 4**). This is a rare case of submucosal tumor of the minor papilla.

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K. J. Kim

Division of Gastroenterology, Department of Internal Medicine, Kosin University College of Medicine, Busan, Korea

Bibliography

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Corresponding author

K. J. Kim, MD

Division of Gastroenterology
Department of Internal Medicine
Kosin University College of Medicine
34 Amnam-dong

Seo-gu
Busan 602-702

Korea

Fax: +82-51-9905206

drkkj@paran.com