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CASE PRESENTATION

OUTSIDE INSTITUTION

75 yo female underwent ERCP for **obstructive jaundice** at a secondary care hospital
 Previous medical history significant for **cholecystectomy**
 Based on the endoscopic image an adenoma of the papilla was suspected following **EST, CBD clearance**
 Histology from the papilla: **adenomatous hyperplasia**
 Re-hospitalized for jaundice, **biliary plastic stent** was placed
 Nine months later **abdominal CT** scan revealed **dilated extrahepatic and intrahepatic ducts** with the biliary stent in place and no pathology in the pancreas

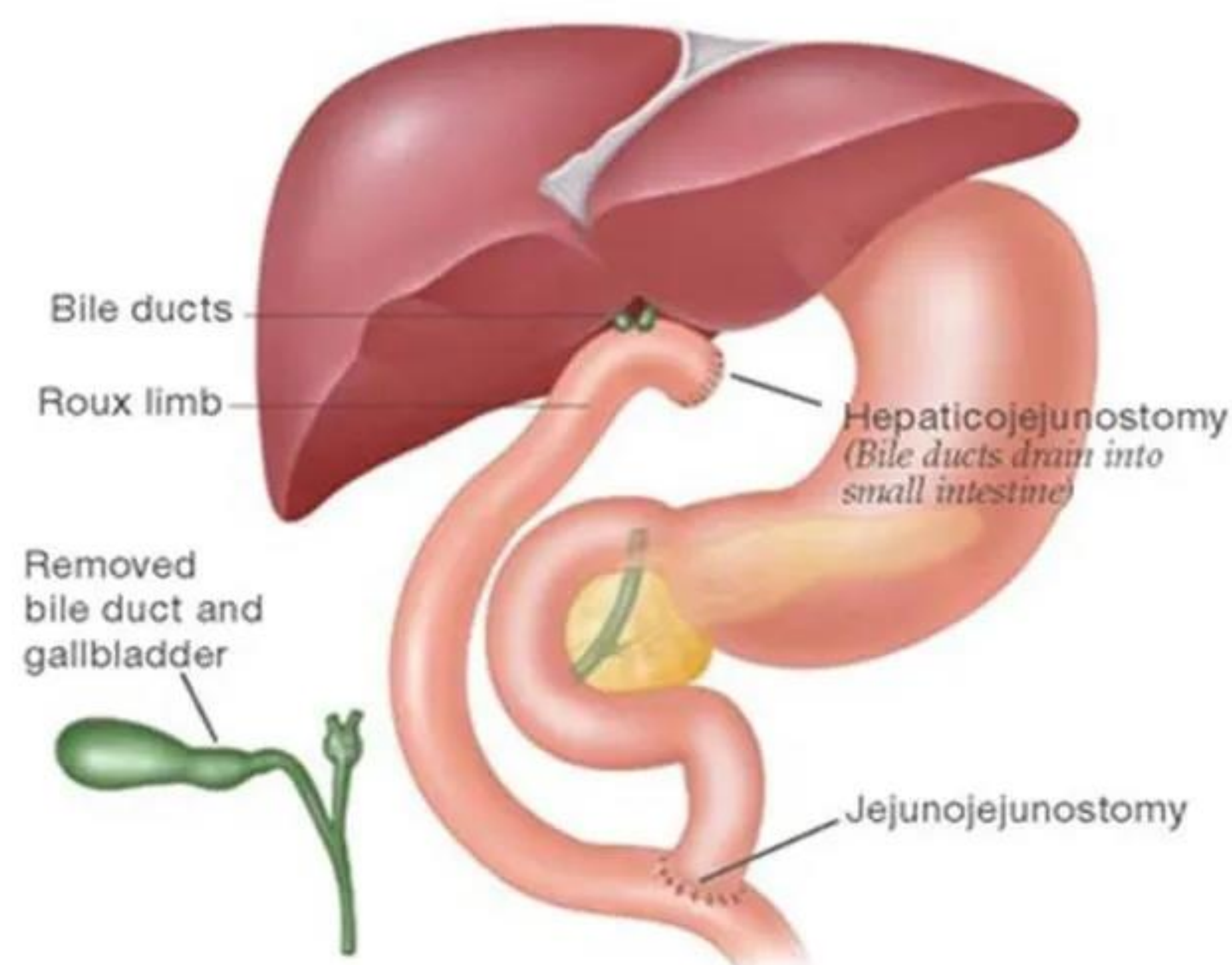
BD RESECTION + ROUX-EN-Y HEPATICO-JEJUNOSTOMY

Proximal extrahepatic bile duct resection with Roux-en-Y hepatico-jejunostomy

Based on:

- the patient age
- the negative results of the papilla biopsies
- the well identifiable, palpable lesion at the expected height
- with the negative intraoperative frozen section analysis of the resection margins

Head of the pancreas was preserved

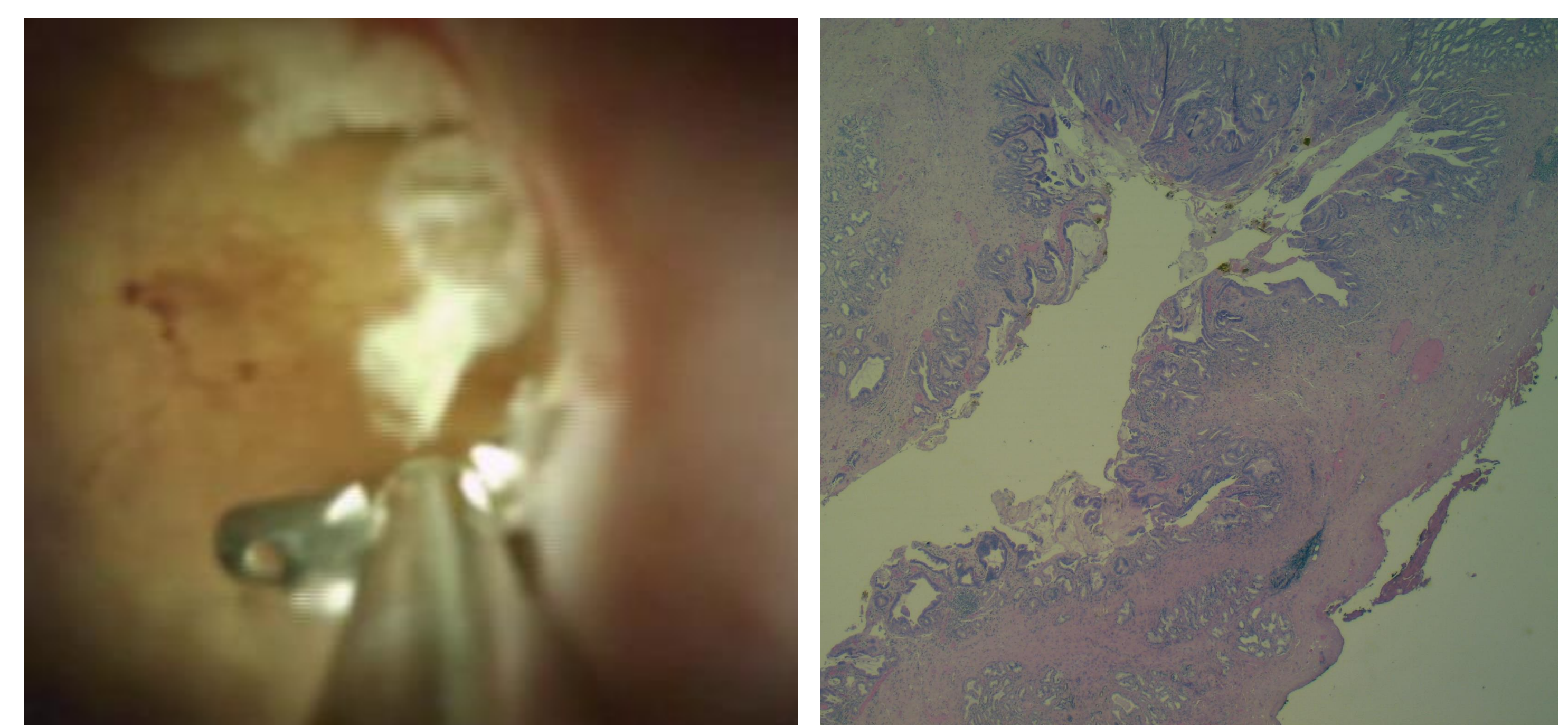


AT OUR CENTER

Fluoroscopy: **stricture at the junction** of the **CBD** and **common hepatic duct**
 EST was extended and **biliary plastic stent** was **replaced**
Brush cytology samples from the **stricture: high-grade dysplasia**
Papilla was **re-biopsied** showing **no signs of dysplasia or malignancy**

CHOLANGIOSCOPY-ASSISTED TARGETED BIOPSIES

Fluoroscopy: **stricture at the junction** of the **CBD** and **common hepatic duct**
 EST was extended and **biliary plastic stent** was **replaced**
Brush cytology samples from the **stricture: high-grade dysplasia**
Papilla was **re-biopsied** showing **no signs of dysplasia or malignancy**



CONCLUSION

Intestinal metaplasia is the rarest subtype of metaplasia in the extrahepatic biliary ducts, and only a few cases had been described so far.¹

To the best of our knowledge our case is the first report of an enteric type intestinal metaplasia of the common bile duct with a cholangioscopic view.

¹Hoang MP et al. Mod Pathol 2001;14(11):1119–1125