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A Combined Large-cell Neuroendocrine Carcinoma And Hepatocellular Carcinoma Tumor In The Liver: A Rare Case Report

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Background: Primary hepatic neuroendocrine carcinoma is extremely rare, with only a few cases reported to date. Hence, preoperative diagnosis is difficult and most are postoperatively diagnosed. In accordance with the general principle of surgical indication applied in liver tumors, resection of the primary hepatic neuroendocrine tumor is also suggested as the mainstay of treatment. Large-cell neuroendocrine carcinoma is poorly differentiated neuroendocrine carcinoma that has been rarely reported in liver. Generally, biological behavior of neuroendocrine carcinoma more aggressive than that of adenocarcinoma We report a rare case of combined primary tumor (large-cell neuroendocrine carcinoma (90%) and hepatocellular carcinoma (10%)) of the liver that was treated curative resection

Methods: This study reviewed a retrospective database of the patient who was diagnosed combined primary tumor (large-cell neuroendocrine carcinoma (90%) and hepatocellular carcinoma (10%)) of the liver. A 73-year-old female with chronic hepatitis B disease presented suspected with a malignant hepatic mass (segment 3, sized 4.5cm) and lymph node metastasis on computed tomography and magnetic resonance imaging. Despite Child-Pugh class A, esophageal varices were presented. The patient underwent left lateral sectionectomy and lymph node dissection. The pathological examination of the resected specimens revealed large cell neuroendocrine carcinoma (90%) and hepatocellular carcinoma (10%) in the form of collision tumors.

Results: Metastasis of large-cell neuroendocrine carcinoma was found in one of the three lymph nodes obtained. She recovered without any postoperative abnormal events and discharged in good condition on postoperative day 13. She did not receive adjuvant chemotherapy and had no recurrence during a follow-up of 14 months

Conclusions: Since combined tumor based on neuroendocrine carcinoma in liver is a very rare disease, there is no guideline for adjuvant treatment for them. In order to improve the therapeutic effect of combined tumor in liver, it is necessary to discuss each individual's clinical experience and consider an appropriate method for preoperative diagnosis and treatment.

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