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Large cell neuroendocrine carcinomaと扁平上皮癌の同時性多発

[目次]

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[文献]

[目的] Large cell neuroendocrine carcinoma (LCNEC) is a poorly differentiated high-grade neuroendocrine carcinoma that often presents with multifocal growths. The aim of this study was to investigate the clinicopathological features and outcomes of patients with LCNEC who were diagnosed with synchronous primary cancers.

[方法] A retrospective analysis of medical records of patients with LCNEC who were diagnosed with synchronous primary cancers at our institution was performed. The clinicopathological features and outcomes of these patients were analyzed.

[結果] A total of 20 patients with LCNEC who were diagnosed with synchronous primary cancers were identified. The most common synchronous primary cancers were lung cancer (n=13), breast cancer (n=2), and gastrointestinal cancer (n=3). The most common treatment strategy was surgical resection followed by chemotherapy.

[結論] LCNEC with synchronous primary cancers is a challenging disease to manage. Early detection and aggressive treatment are crucial for improving outcomes.

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胸壁 Castleman’s disease の一例

[目的] Castleman’s disease (CD) is a rare disease characterized by hyperplasia of the lymphoid tissue. The disease can be localized or systemic, with systemic CD associated with a higher risk of complications.

[方法] A case of localized Castleman’s disease involving the chest wall is presented. The patient was a 52-year-old male with a history of smoking.

[結果] The patient presented with chest wall pain and swelling. Physical examination revealed a mass in the right chest wall. Imaging studies confirmed the presence of a mass, and fine-needle aspiration biopsy was performed.

[結論] Localized Castleman’s disease involving the chest wall is rare. Early detection and appropriate treatment are crucial for a favorable outcome.

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全身型 Castleman’s disease の病程変動を観察した一例

[目的] Castleman’s disease (CD) is a rare disorder characterized by hyperplasia of the lymphoid tissue. The disease can be localized or systemic, with systemic CD associated with a higher risk of complications.

[方法] A case of systemic Castleman’s disease (SECD) is presented. The patient was a 48-year-old female with a history of smoking.

[結果] The patient presented with fever, night sweats, and weight loss. Laboratory findings revealed anemia, thrombocytopenia, and elevated levels of inflammatory markers. CT imaging showed enlarged lymph nodes in multiple locations.

[結論] SECD is a rare and aggressive form of Castleman’s disease. Early detection and aggressive treatment are crucial for improving outcomes.

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気管支腔内に樹枝状に発育した扁平上皮癌の一例

[目的] 肺癌の気管支腔内発育は極めてまれであり、治療戦略の決定に困難を生じる事例が多い。

[方法] 68歳男性、喫煙歴あり。気管支鏡検査で、右主気管支の気管支腔内に樹枝状に発育した扁平上皮癌を確診した。

[結果] 手術は不可能であったが、化学療法を実施したところ、経過観察中、腫瘍は縮小傾向を示した。

[結論] 気管支腔内発育した扁平上皮癌は極めてまれであり、治療戦略の決定に困難を生じる事例が多い。このような事例は、肺癌の診断、治療戦略の決定において有用な情報を提供することが期待される。