

An Unusual Cause of Cholangitis

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Keywords

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Uma causa incomum de colangite

Palavras chave

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A 57-year-old man with unremarkable previous medical history presented with acute cholangitis and cholestasis. An abdominal computed tomography showed a dilation of the biliary system with hypodense irregular filling defects in the common bile duct (CBD) and previously unknown liver cirrhosis.

The papilla was normal; a subsequent intraductal ultrasonography showed multiple papillary projections in the CBD (Fig. 1). These findings were confirmed by cholangioscopy [1], which identified multiple lesions with “fish-egg” appearance protruding in a dilated CBD filled

with whitish mucus (Fig. 2). Biopsies with microforceps on the papillary lesions (Fig. 3) were performed, and histological examination highlighted the presence of papillary proliferation with focal high-grade dysplasia without stromal invasion, thus confirming the final diagnosis of intraductal papillary neoplasm BillN-3 (Fig. 4) [2].



Fig. 1. Intraductal ultrasonography: dilated CBD with papillary projections.



Fig. 2. Cholangioscopy: CBD lesions with “fish egg” appearance.

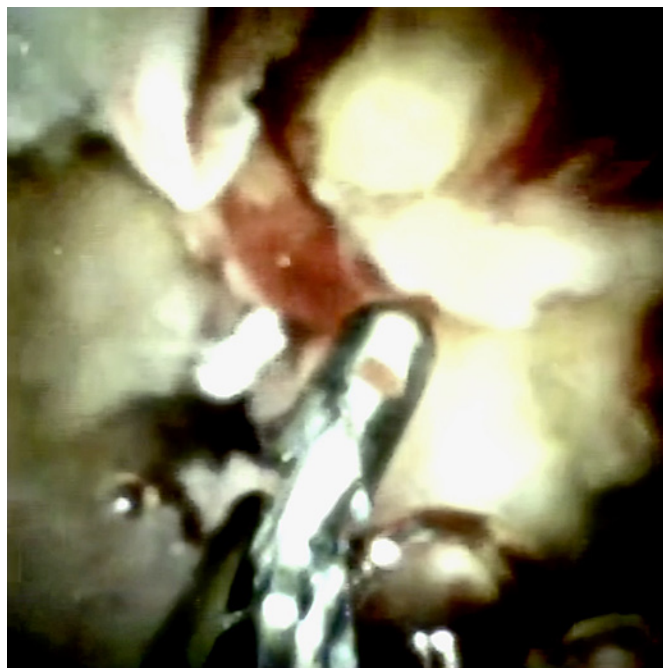


Fig. 3. Cholangioscopy: biopsy with microforceps.

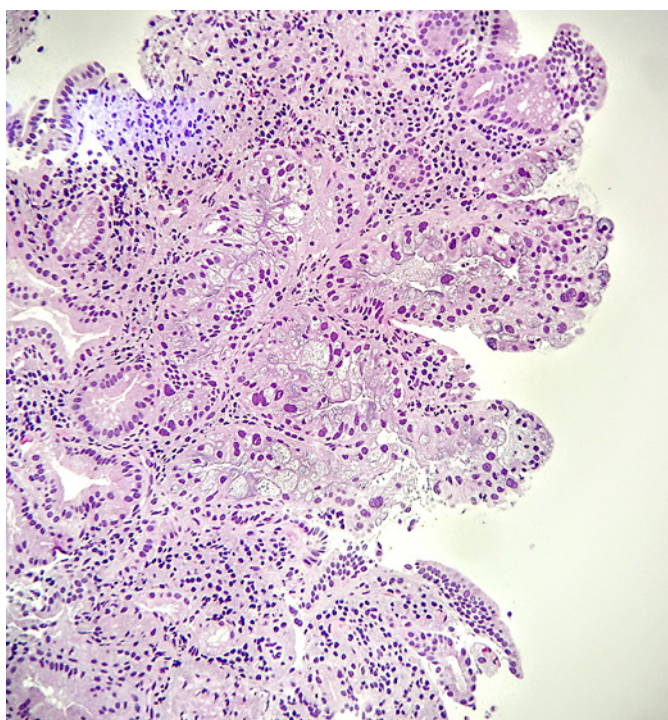


Fig. 4. Papillary proliferations with high-grade dysplasia.

Due to the high rate of malignant transformation of this disease despite its slow progression, after multidisciplinary discussion the patient has now been referred and selected for orthotopic liver transplantation [3].

Statement of Ethics

This material has not been published in whole or in part elsewhere; the manuscript is not currently being considered for publication in another journal; all authors have been personally and actively involved in substantive work leading to the manuscript and will hold themselves jointly and individually responsible for its content.

Disclosure Statement

All authors declare that there is no conflict of interest related to this manuscript.

Author Contributions

P. Cortegoso Valdivia and L. Venezia equally contributed in writing the manuscript, S. Rizza contributed to its editing and selection of the images, L. Chiusa analyzed and provided images of the histological specimens, and C.G. De Angelis contributed with critical revision.

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