

A Striking Case of Mucinous Gallbladder Adenocarcinoma Mimicking Mirizzi's Syndrome

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Introduction

- Gallbladder carcinoma is the most common biliary malignancy in the US
- Mucinous adenocarcinoma of the gallbladder can present with gallbladder distension and biliary obstruction

Case Presentation

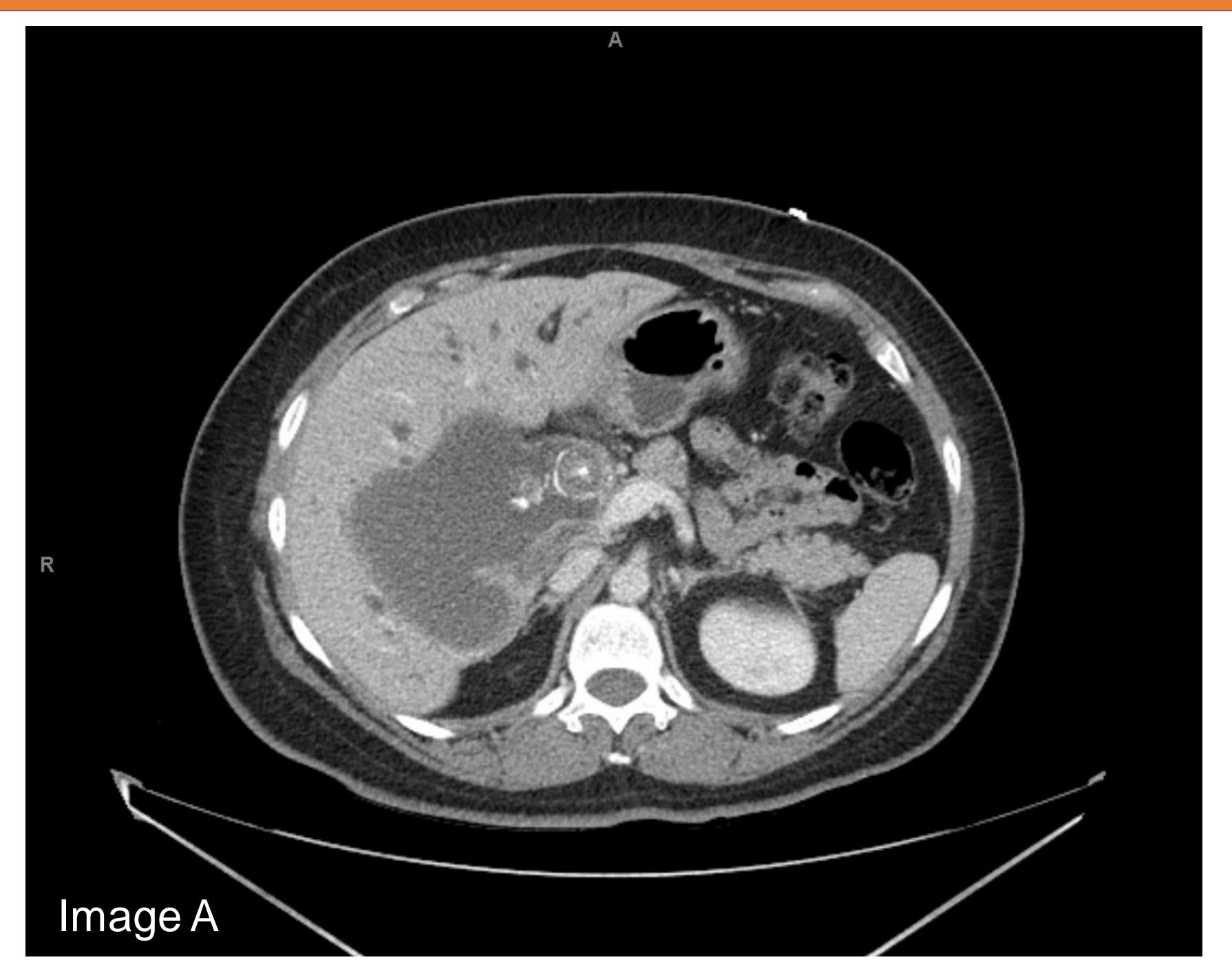
49-year-old healthy female

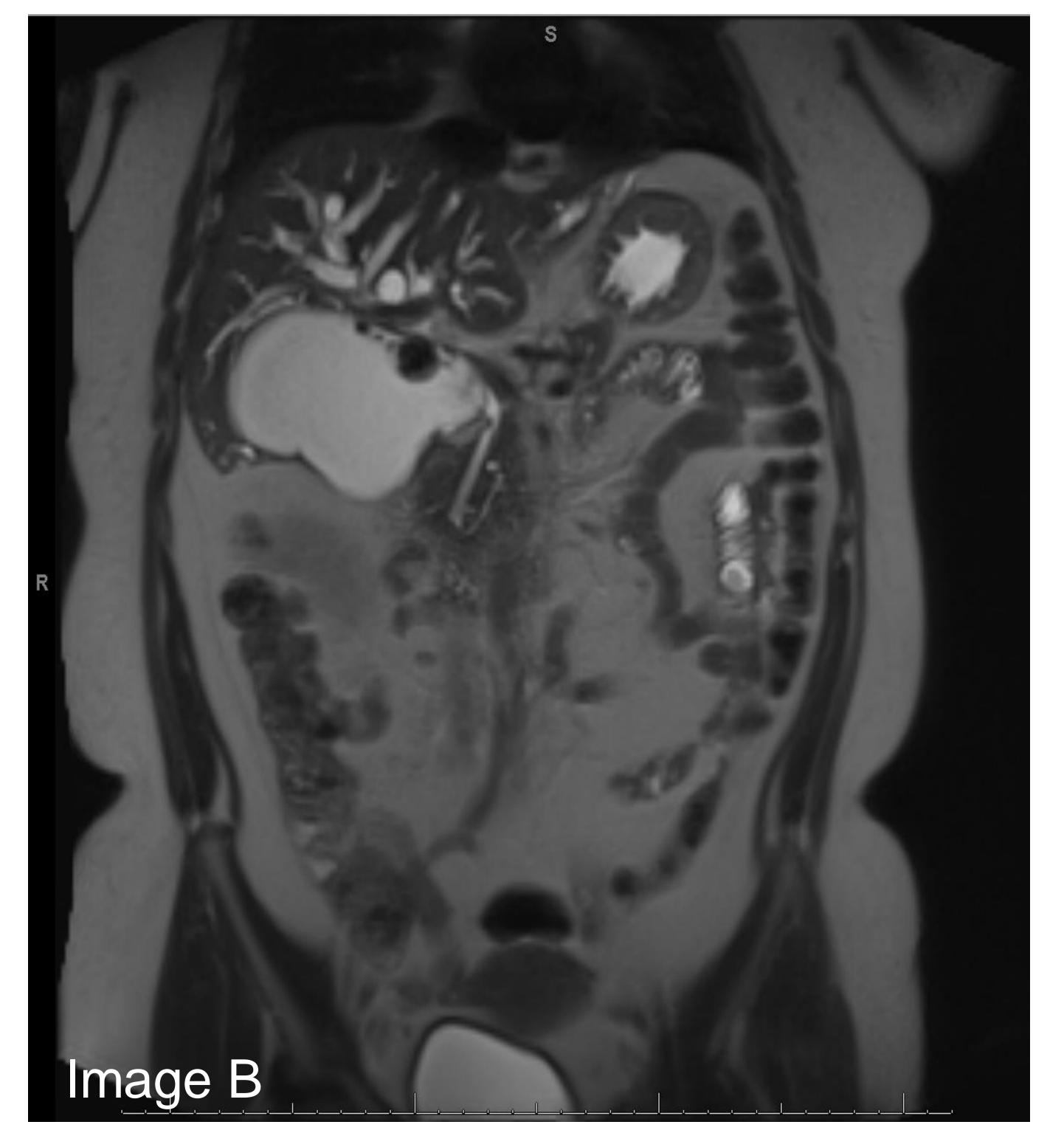
- CC: 10 days jaundice + RUQ pain
- SocHx: No EtOH, drug use or tobacco
- VS: T 36.7, HR 85,BP 120/77, O2 98%
- Labs: AST 106, ALT 246, Tbili 9.0
- Imaging: CT and MRCP [Image A&B]:
 - Gallbladder distension
 - 2 large gallstones at gallbladder neck
 - Dilatation of the hepatic ducts with abrupt cut off at level of gallstones

Hospital Course

- HD 2: ERCP- thick mucus, multiple calculi and sludge in CBD
- HD 9: laparoscopy revealed an inflamed gallbladder, total cholecystectomy unsuccessful given significant scarring
 - surgical specimen revealed 1 cm gallbladder wall tumor, pathology demonstrated welldifferentiated invasive mucinous adenocarcinoma, stage pT1b, chemotherapy initiated

Images





Outcome

 12 months post hospitalization: patient expired secondary to abdominal compartment syndrome due to large volume malignant ascites from omental metastases

Discussion

- Gallbladder adenocarcinoma dx usually at advanced stage given lack of sensitive signs + testing
- In this case, stones confounded the dx as the patient met clinical criteria for Mirizzi's syndrome
- Treatment of choice is radical cholecystectomy
- Prognosis is poor. In the largest series documenting outcomes of 15 cases, the three-year survival rate was 1% versus 39% seen in the comparator group with conventional gallbladder adenocarcinoma

References

Feig BW, Ching CD. Gallbladder Cancer. In: The MD Anderson Surgical Oncology Handbook. 6th ed. Philadelphia, PA: Wolters Kluwer; 2019:389-393. Dursun N, Escalona OT, Roa JC, et al. Mucinous carcinomas of the gallbladder: clinicopathologic analysis of 15 cases identified in 606 carcinomas. Arch Pathol Lab Med. 2012 Nov;136(11):1347-58.

