

## 腹腔鏡補助下幽門側胃切除術を行った胃脂肪腫の1例

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## A case of gastric lipoma, resected by laparoscopic distal gastrectomy

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### Abstract

A seventy year-old female presented with upper abdominal pain. Upper GI endoscopy revealed a submucosal tumor with ulceration. Gastric lipoma was suspected, and the patient was referred for endoscopic ultrasonography and follow-up. During the following 15 months, the tumor enlarged, without symptoms. Eighteen months later, endoscopic examination revealed a 5cm tumor with deep ulceration. A CT scan found the tumor to be homogeneous. Densitometric values were consistent with adipose tissue and therefore highly suggestive of gastric lipoma. Because the progressive enlargement of the tumor was suspicious for malignancy, laparoscopic assisted distal gastrectomy was performed. Both gross and microscopic examination of the resected specimen revealed a tumor mainly composed of adipose tissue with fibrous connective tissue surrounding the ulceration. The pathological diagnosis was gastric lipoma. In this case, CT scan appears to be the most reliable diagnostic tool for ulcerative gastric lipoma. Additionally, this case indicates that progressive gastric lipoma should be resected early using a minimally invasive treatment such as laparoscopic surgery, which is suitable for gastric lipomas that are not amenable to endoscopic resection.

**Key words:** gastric lipoma, laparoscopic surgery, gastric liposarcoma

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