Primary pure squamous cell carcinoma of the duodenum: report of three cases

Carcinoma of the duodenum is very rare, and most duodenal carcinomas are adenocarcinomas [1]. A review of the English literature revealed only two cases of squamous cell carcinoma of the duodenum [2, 3], and one case of adenosquamous carcinoma [4]. Here, we report three cases of pure squamous cell carcinoma of the duodenum.

**Case 1**: A 75-year-old man was admitted to our hospital because of vomiting and weakness. An endoscopic examination revealed a circumscribed, obstructing tumor in the second part of the duodenum distal to the ampulla of Vater (Fig. 1a). Eight biopsy samples were obtained, and all of them showed pure squamous cell carcinoma (Fig. 1b). The patient was treated with chemotherapy and radiation, but he died of systemic metastasis 17 months after the first presentation.

**Case 2**: A 58-year-old woman presented with abdominal pain. An endoscopic examination revealed an ulcerated tumor in the second part of the duodenum near the ampulla of Vater (Fig. 2a). Seven biopsy samples were taken, and all of them showed pure squamous cell carcinoma (Fig. 2b). The patient was treated with chemotherapy and radiation, but she died of metastasis 21 months later.

**Case 3**: A 54-year-old man presented with abdominal pain. Endoscopy revealed an ulcerated tumor in the second part of the duodenum distal to the ampulla (Fig. 3a), and four biopsy samples were taken. All of them revealed pure squamous cell carcinoma (Fig. 3b). The patient was admitted to another specialist hospital for surgery.

In all the three cases, the imaging investigations at the first presentation did not reveal tumor in other locations, including the pancreas, and the duodenal tumors were different from ampullary tumor and pancreatic tumor. All the three tumors lacked differentiation into adenocarcinoma or neuroendocrine carcinoma.

The pathogenesis of squamous cell carcinoma of the duodenum is still uncertain. Barnhill and colleagues [5] reported an interesting duodenal tumor with tripartite differentiation into adenocarcinoma, squamous cell carcinoma, and neuroendocrine carcinoma [5]. They speculated that the tumor in their case had arisen from duodenal pluripotent stem cells capable of differentiating into multiple cell types [5]. The tumors in all the present cases might also have arisen from such pluripotent stem cells.

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References
1 Wright NH, Pennazio M, Howe JR et al. Carci-
noma of the small intestine. In: Hamilton SR,
Aaltonen LA (eds). WHO classification of tu-
mours. Pathology and genetics, tumor of the
digestive system. Lyon IARC Press; 2000:
71–76
2 Friedman E, Kwan MR, Cummins L. Squa-
mous cell carcinoma of the transverse du-
101
3 von Delius S, Lersch C, Neu B et al. Squamous
cell carcinoma of the duodenum as a rare
cause of upper gastrointestinal bleeding.
Endoscopy 2006; 38: 956
4 de la Cruz A, de la Cruz E, Sanchez MJ et al.
Adenosquamous carcinoma of the duode-
um: an immunohistochemical study. Pa-
thol Res Pract 1993; 189: 481–485
5 Barnhill M, Hess E, Guccion JG et al. Tripartite
differentiation in a carcinoma of the duode-

Bibliography
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