CT   :   [1]

.   .   .   [2].   .   .

,

.
,   CT
,   .

(neuroendorine tumor)   0.3%   cm   .
,   CT   . CT
(adenocarcinoma)   (1, 2).   (Sensation 4; Siemens Medical Systems, Forchheim,
                                                        Germany)   ,   6 g
                          .   ,   (,   ,   )
                                        (composite   70   . 2D
tumor)   ,
                              (collision tumor)   6 cm
          (1- 3).   ,
    ,   ,
              ,
                    (1, 2, 4, 5).   1.8 cm
                    ,   (Volume   ,   ,
Rendering)   (Transparent Rendering)   (Fig. 1A).
        CT   3D workstation
                                                        (Lucion 7107, KCMISG, Seoul, Korea)
                          .   CT
                                                                                                .
    57   (Fig. 1B- C).
                    .   ,   ,
                    ,   ,   ,
                    .   X   6   .   1.8 cm
          ,   X   (Fig. 1D).
          .   (dense fibrous stoma)   (pse-
                                                        udorosette)   (nest)

Fig. 1. A. Axial CT scan shows about 6 cm sized lobulated submucosal mass (arrows) in posterior wall of antrum of the stomach with intact mucosa which is presented as thin enhancing layer. Central portion of this submucosal mass has a deep fissure (arrowhead) and continues to irregularity and enhancement of mucosa. There is also another well defined enhancing nodule (asterisk) which is located subserosal direction.

B, C. CT gastrography including virtual gastroscopy (B) and transparent rendering (C) using volume rendering demonstrates that submucosal tumor portion (arrows) presents smooth mucosal surface without converge nor fusion of the rugal folds. On the other side, the lesion that has the mucosal irregularity and nodularity (arrowheads) demonstrates converges of the rugal folds.

D. Gross pathology shows two distinct different lesions, one is the lobulated submucoal mass (arrows) with intact mucosa and the other is the mucosal origin tumor that has many papillary projections (arrowheads). And also note the subserosal attached lymph node (asterisk).

E. Microscopically, the tumors are composed of two distinct neoplastic cell component. Adenocarcinoma shows the large and well formed grandular structure and neuroendocrine tumor shows the solid nests of tumor cells and pseudorosettes within a dense fibrous stroma. There is a no admixture at the interface between the neuroendocrine carcinoma (black asterisk) and adenocarcinoma (white asterisk) (H & E; × 40).

chromagranim synaptophysin

,   ,

,   Haematoxylin- eosin   .   ,

,   (carcinoembryonic antigen: CEA)   ,   2D

.   CT   CT

,

(Fig. 1E).

10   (9).   ,

.

,

,

,

.   .   .   .

.   0.3 %   .

11- 41%   (2, 3, 6,   6 cm

7).   ,

, CT

(argyrophil cell tumor)

(neuroendocrine carcinomas; NECs)   (6).   .

1   , 2   , 3   volume rendering

. 1

, 2   -   (Zollinger- Ellison   CT

syndrome)   1   (multiple endocrine   .   . 1E

neoplasia Type1)   , 3   ,

‘   (sporadic)’   (8).   .

,

CT

(6, 7).   .

.   , 2D   ,

(composite   CT

tumor)   ,   .

(collision tumor)   (1- 3).

.

(common multipotential epithelial stem cell)

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nal neuroendocrine cell carcinoma: a composite tumour or colli-
sion tumours ? *Gut* 2001;48:853-856

(multipotential epithelial stem cell)

(primitive neuroendocrine cell)

(1- 3).

(Multi detector row CT: MDCT)

(Multi- planar

Reconstruction),

CT

.   2D

3.   ,   ,   ,   .
                    : 1   .   2002;47:
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CT Gastrography Findings of a Gastric Collision Tumor that Consisted of an Adenocarcinoma and Neuroendocrine Tumor: A Case Report[1]

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Concurrent occurrence of an adenocarcinoma and carcinoid tumor in the stomach has been observed infrequently; moreover, a gastric collision tumor of both tumor types has rarely been seen. We describe a case of a gastric collision tumor following the differential diagnosis from observing the morphological patterns more closely using CT gastrography. The patient presented with a gastric collision tumor that consisted of an adenocarcinoma and carcinoid tumor in the antrum of the stomach.

Index words : Stomach neoplasms
　　　　　　　　Neoplasms, multuple primary
　　　　　　　　Carcinoma, neuroendocrine
　　　　　　　　Tomography, X-ray computed

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