Laparoscopic ampullectomy for an ampullarian adenoma

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Abstract Lesions involving the ampulla of Vater are rare entities (0.1–0.2 %) with high malignant potential (90 %) [1]. As a treatment, the surgical procedure known as duodenopancreatectomy was the main option, whatever the tumor's stage or nature. Yet with improvements of endoscopic diagnostic and therapeutic techniques, management of these lesions has been modified, enabling endoscopic removal of adenoma and adenocarcinoma-in situ. Thus, when endoscopic treatment is not possible, surgical ampullectomy is still an alternative option to duodenopancreatectomy [1, 2]. The continuous improvements in surgical techniques and instruments now allow the safe realization of laparoscopic ampullectomy, despite the few cases described in the literature [3, 4]. Here we present a surgical technique in a 52-year-old patient with an ampulloma. The ampulloma was discovered during a gastroscopy for abdominal pain. The endoscopic ultrasound with biopsy revealed a 15-mm adenoma with moderate-grade dysplasia. The thoracoabdominal CT scan was normal. The procedure was performed as shown. The tumor histology showed a R0 resection (5-mm surgical margin) of an adenoma with focal high-grade dysplasia. At 3-year follow-up, outcomes were unremarkable, without any complications.

Keywords Ampulla of Vater · Ampullectomy · Laparoscopy

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