

Hepatology and Gastroenterology | Image

Brunner's gland adenoma of duodenum

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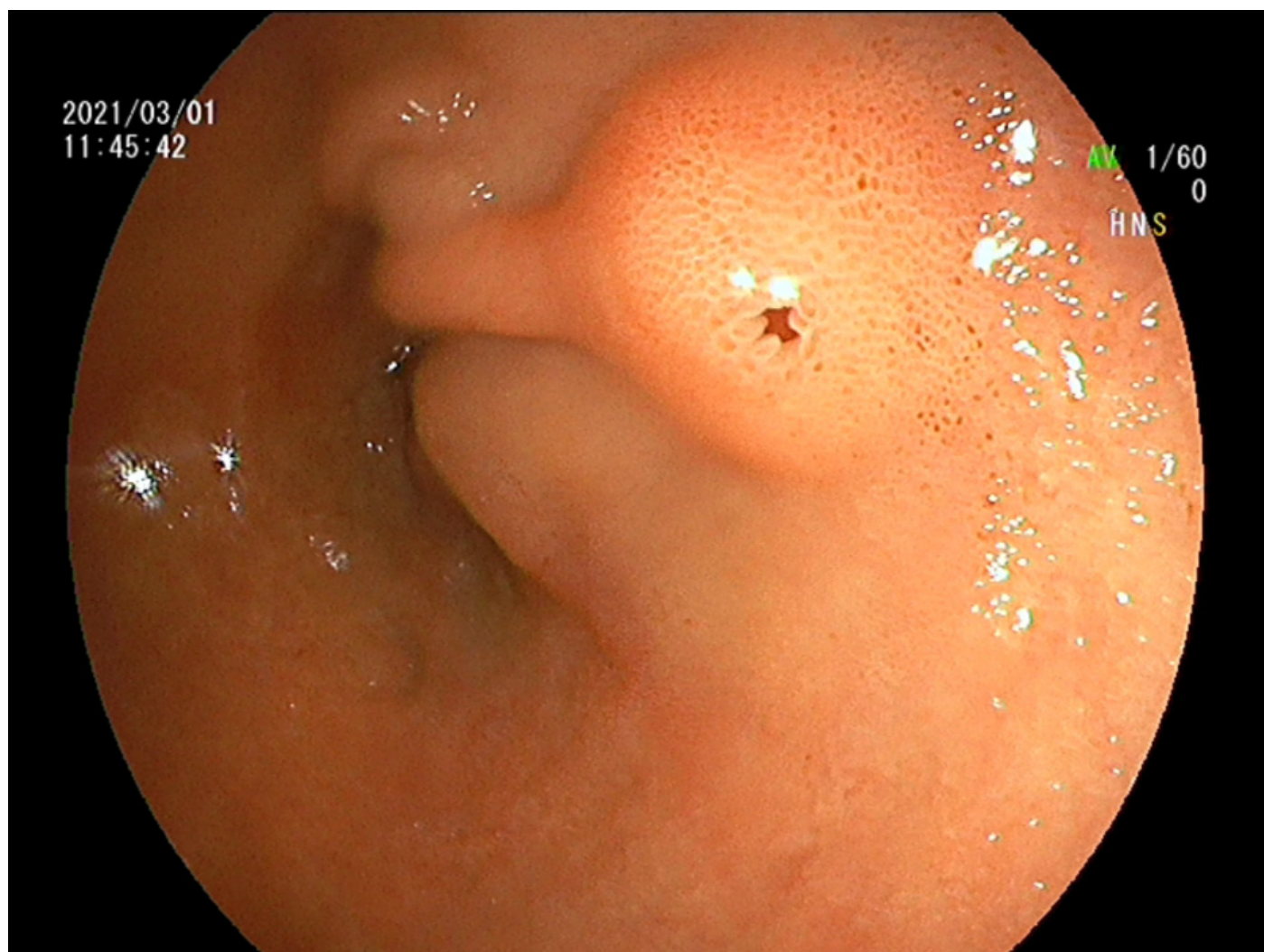


Figure 1A: Brunner's gland adenoma of duodenum

A 78-year-old man presented to our hospital with a 1-year history of abdominal distension and constipation. Except for hypertension, he had no documented medical history. Physical examination was unremarkable. Laboratory examination confirmed no abnormality. Although no clues for abdominal distension were found, esophagogastroduodenoscopy demonstrated a large pedunculated duodenal mass with surface erosions (Figure 1A). It was removed successfully with nylon loop followed by snare resection. Pathological examination revealed massive Brunner gland proliferation and an abnormal architecture, which was consistent with the Brunner gland adenoma. *Helicobacter pylori* testing was negative. Brunner's gland adenoma of duodenum was an unexpected finding in this case. Brunner gland tumor, known as a hamartomatous or hyperplastic collection of mature glands, is a rare benign duodenal lesion with no known potential for malignant transformation [1, 2]. Brunner's gland adenoma, whose alkaline mucin secretions may protect the epithelium from gastric chyme, often originates from the posterior wall of the first or second duodenal segment [3, 4]. Brunner's gland adenoma is often typically found incidentally on endoscopy [5, 6]. *H. pylori* infection and pancreatic insufficiency have been postulated as potential mechanisms [7, 8]. There are no established guidelines for follow-up after endoscopic or surgical removal treatment [9, 10].

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Conflicts of Interest

The authors have no conflicts of interest to declare.

Ethical Statement

The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Written informed consent was obtained from the patient for publication of this "GI Image".

Author's contributions

Collection of data: Zhong-Xin Yang.
Manuscript preparation and writing: Wei Liu.
Final approval of the manuscript: all authors.

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