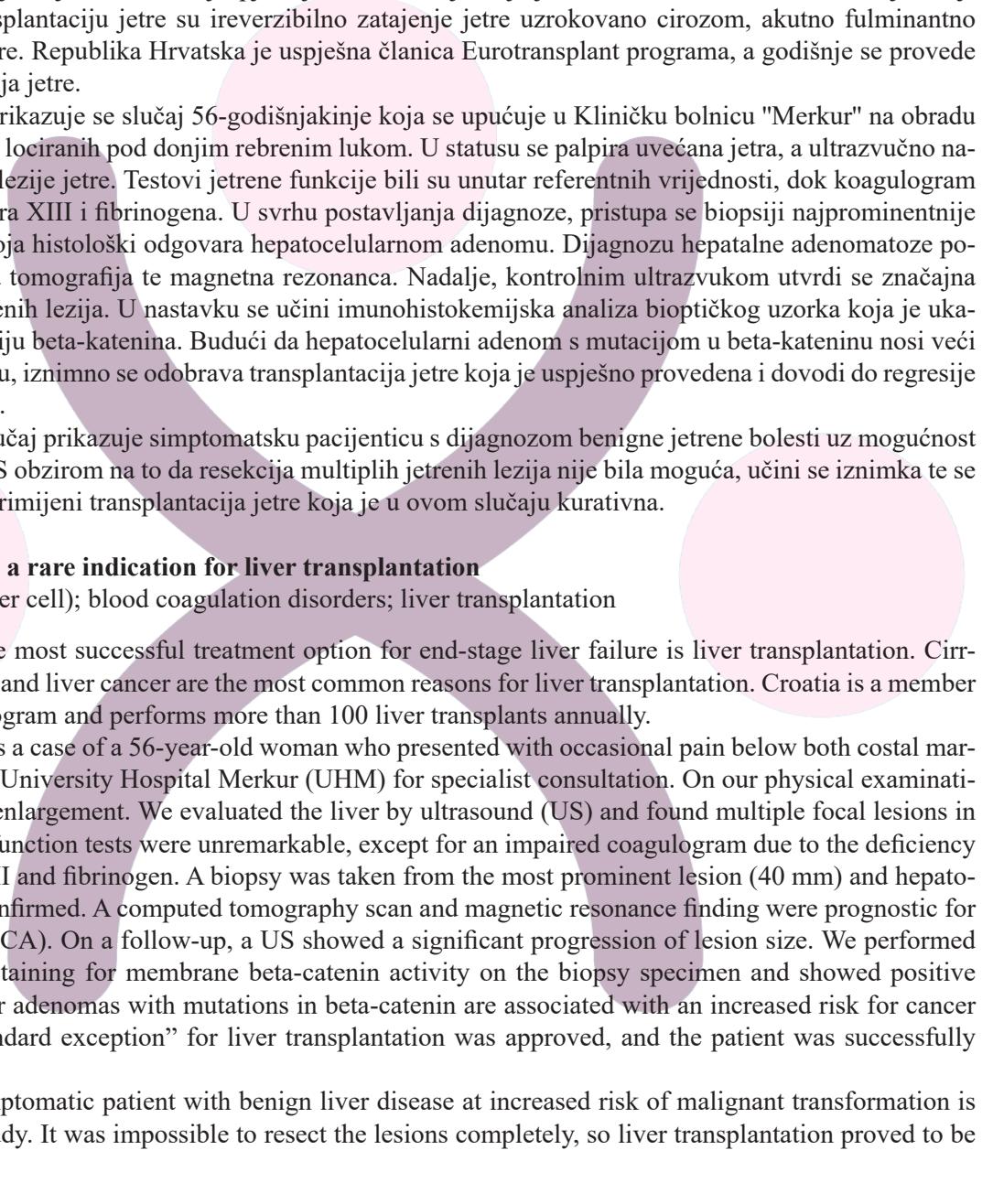


PS15 Hepatalna adenomatoza - prikaz rijetke indikacije za transplantaciju jetreNikolina Novak^a, Tin Rosan^b, Nikola Sobočan^c^a Objedinjeni hitni bolnički prijem, Klinička bolnica Dubrava^b Medicinski fakultet Sveučilišta u Zagrebu^c Zavod za gastroenterologiju, Klinička bolnica "Merkur"DOI: <https://doi.org/10.26800/LV-144-supl6-PS15>

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Ključne riječi: hepatalna adenomatoza; koagulopatija; transplantacija jetre

UVOD: Transplantacija jetre je trenutno najuspješniji modalitet liječenja jetrenih bolesti u završnom stadiju. Najčeće indikacije za transplantaciju jetre su ireverzibilno zatajenje jetre uzrokovano cirozom, akutno fulminantno zatajenje te karcinom jetre. Republika Hrvatska je uspješna članica Eurotransplant programa, a godišnje se provede više od 100 transplantacija jetre.

PRIKAZ SLUČAJA: Prikazuje se slučaj 56-godišnjakinje koja se upućuje u Kliničku bolnicu "Merkur" na obradu zbog povremenih bolova lociranih pod donjim rebrenim lukom. U statusu se palpira uvećana jetra, a ultrazvučno nalazimo multiple fokalne lezije jetre. Testovi jetrene funkcije bili su unutar referentnih vrijednosti, dok koagulogram ukazuje na manjak faktora XIII i fibrinogena. U svrhu postavljanja dijagnoze, pristupa se biopsiji najprominentnije jetrene lezije (40 mm) koja histološki odgovara hepatocelularnom adenomu. Dijagnozu hepatalne adenomatoze potvrđuje kompjuterizirana tomografija te magnetna rezonanca. Nadalje, kontrolnim ultrazvukom utvrđi se značajna progresija u veličini jetrenih lezija. U nastavku se učini imunohistokemijska analiza bioptičkog uzorka koja je uka-zala na značajnu ekspresiju beta-katenina. Budući da hepatocelularni adenom s mutacijom u beta-kateninu nosi veći rizik za malignu alteraciju, iznimno se odobrava transplantacija jetre koja je uspješno provedena i dovodi do regresije svih tegoba u pacijentice.

ZAKLJUČAK: Ovaj slučaj prikazuje simptomatsku pacijenticu s dijagnozom benigne jetrene bolesti uz mogućnost maligne transformacije. S obzirom na to da resekcija multiplih jetrenih lezija nije bila moguća, učini se iznimka te se kao modalitet liječenja primijeni transplantacija jetre koja je u ovom slučaju kurativna.

Hepatic adenomatosis - a rare indication for liver transplantation

Keywords: adenoma (liver cell); blood coagulation disorders; liver transplantation

INTRODUCTION: The most successful treatment option for end-stage liver failure is liver transplantation. Cirrhosis, acute liver failure, and liver cancer are the most common reasons for liver transplantation. Croatia is a member of the Eurotransplant program and performs more than 100 liver transplants annually.

CASE REPORT: This is a case of a 56-year-old woman who presented with occasional pain below both costal margins that was referred to University Hospital Merkur (UHM) for specialist consultation. On our physical examination, we discovered liver enlargement. We evaluated the liver by ultrasound (US) and found multiple focal lesions in an enlarged liver. Liver function tests were unremarkable, except for an impaired coagulogram due to the deficiency of coagulation factor XIII and fibrinogen. A biopsy was taken from the most prominent lesion (40 mm) and hepatocellular adenoma was confirmed. A computed tomography scan and magnetic resonance finding were prognostic for hepatic adenomatosis (HCA). On a follow-up, a US showed a significant progression of lesion size. We performed immunohistochemistry staining for membrane beta-catenin activity on the biopsy specimen and showed positive results. As hepatocellular adenomas with mutations in beta-catenin are associated with an increased risk for cancer development, a „non-standard exception“ for liver transplantation was approved, and the patient was successfully transplanted.

CONCLUSION: A symptomatic patient with benign liver disease at increased risk of malignant transformation is presented in this case study. It was impossible to resect the lesions completely, so liver transplantation proved to be the only long-term cure.