

中文題目:食道異生性汗腺的臨床意義

英文題目: Clinical Significance of Esophageal Heterotopic Sebaceous Glands

作者: 廖敏凱¹, 林志陵¹, 陳冠仰¹, 廖麗瑛¹, 林聰蓉¹, 李熹昌¹, 張廷安²

服務單位: 台北市立聯合醫院仁愛院區消化內科¹ 台北市立聯合醫院仁愛院區解剖病理科²

Background: Sebaceous glands are ectoderm-derived and cover the body surface with pilosebaceous units. Ectopic sebaceous glands have been reported at the eyes, oral cavity, nipples, external genitalia, palms, and soles. Sebaceous gland in the esophagus was firstly observed at autopsy by Dela Pava and Pickrenin 1962. Approximately 40 cases have been reported since then. Sebaceous gland metaplasia (SGM) attracted scientific interest for its ectodermal origin, whereas esophagus was an endoderm-derived organ. We reported 8 cases of SGM and aimed to clarify the clinical significance of SGM.

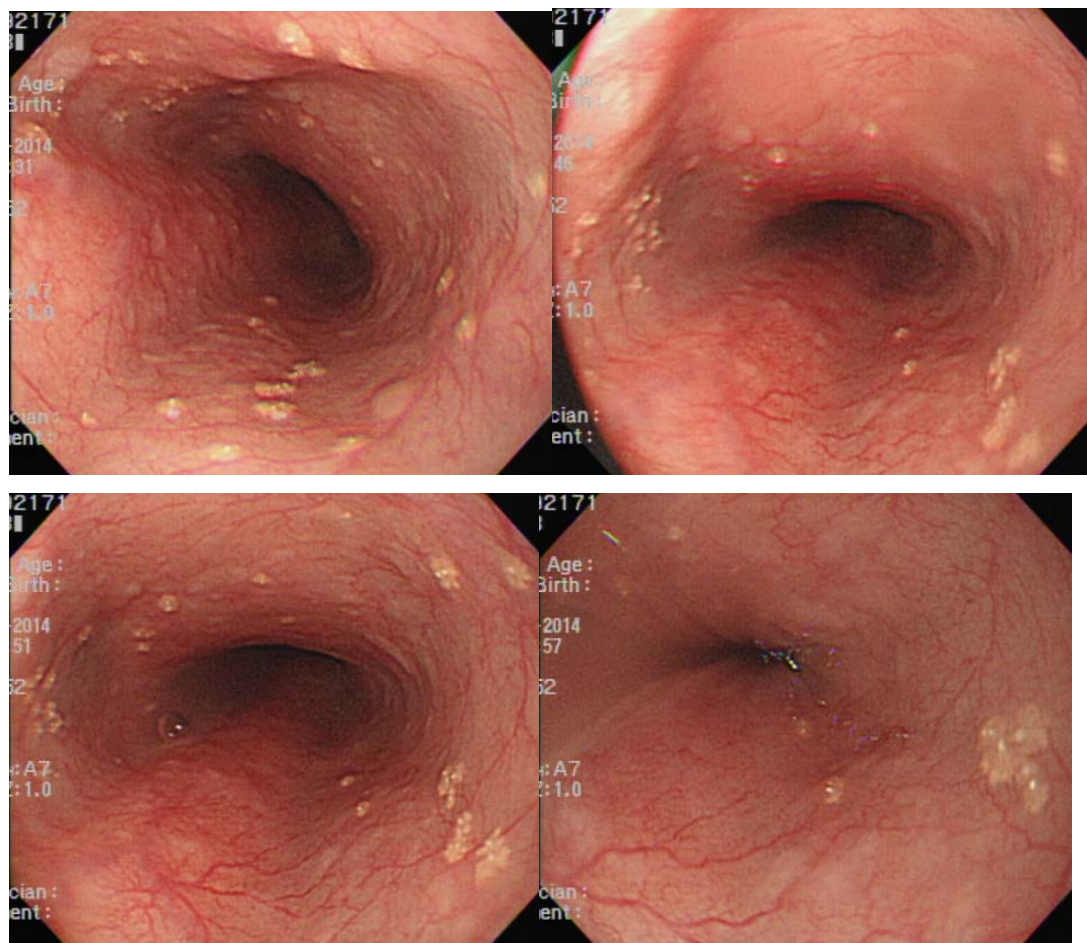
Methods: A total of 82365 patients receiving esophageogastroduodenal endoscopy examination in Taipei city hospital Ren-Ai branch between Jan. 2007 and Aug. 2015 were enrolled. Cases of endoscopic ultrasound of the upper gastrointestinal tract, endoscopic retrograde cholangiopancreatography, and double-balloon enteroscopy via an oral route were excluded from this study. The clinical presentation and endoscopic characteristics of patients with pathologically proven SGM were analyzed.

Result: Totally 8 cases of SGM were collected. The incidence rate was 0.97% in our study. The male to female ratio was 2:6, revealing a trend of female predominance. The average age during the time of diagnosis was 54.12 years old. The characteristics of endoscopic findings were reviewed. The lesions were described as yellowish flat plaque or patches in general. One case was described as candidiasis at first. Mostly the lesions were distributed at mid-portion of esophagus (6 in 8 cases), but the rest two portions carries potentials of development of SGM.

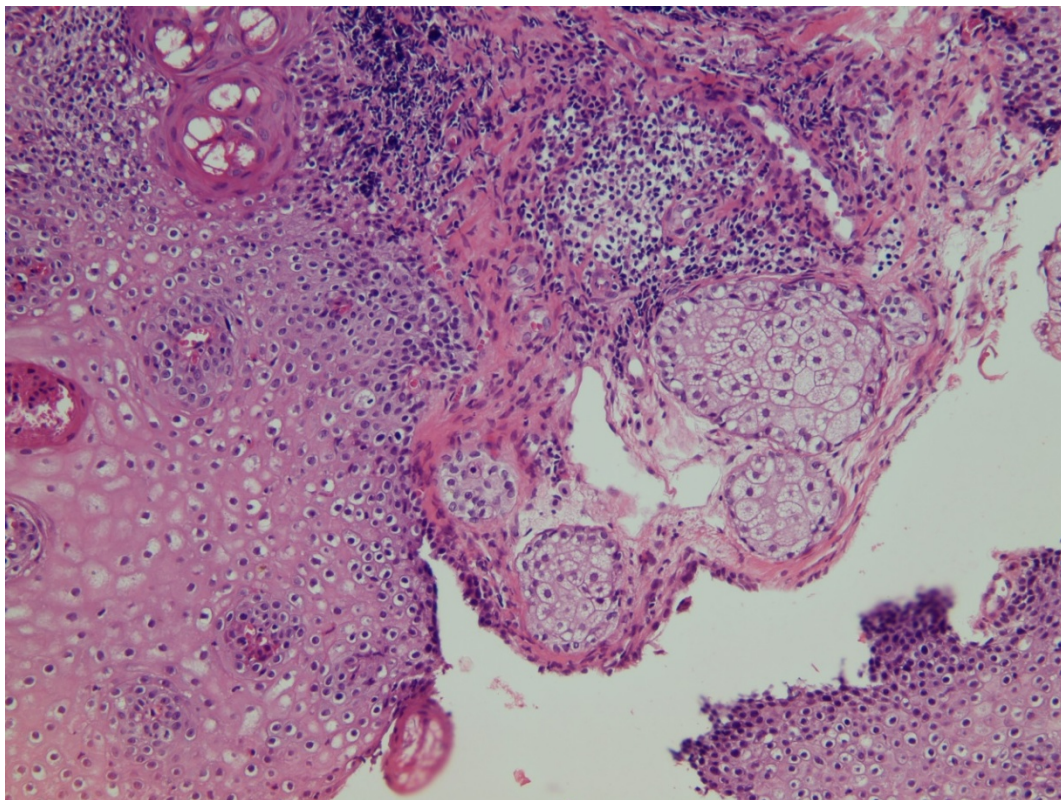
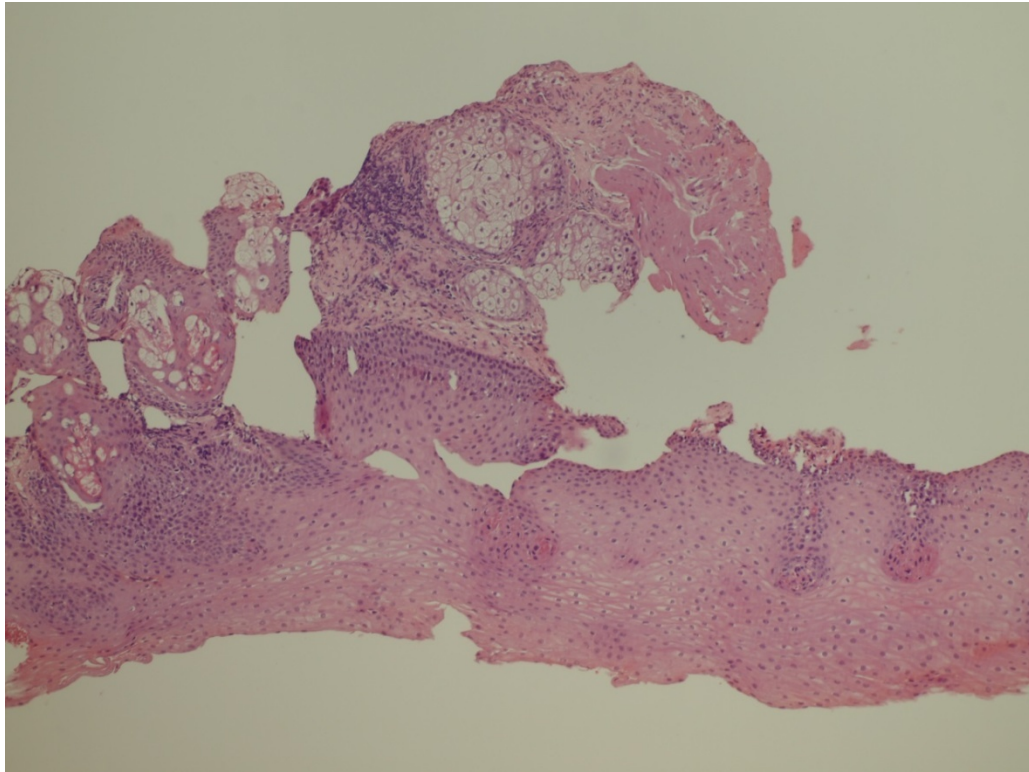
Case	Sex	Age	Year	Description	Biopsy	Source	Location
1	F	56	2007	-	SGM	Health exam	L
2	F	56	2009	Yellowish plaques lesions	SGM	OPD	M
3	F	59	2009	Multiple light yellowish patches	SGM	ER	U+M+L
4	M	54	2010	Candidiasis	SGM	OPD	M

5	F	53	2011	Slight yellowish upward protrusions	SGM	OPD	L
6	F	55	2013	Multiple yellowish lesion	SGM	OPD	U+M
7	F	59	2014	Esophageal yellowish lesions	SGM	OPD	M
8	M	41	2015	Whitish plaques coating	SGM	OPD	M

Endoscopic findings:



Pathologic findings:



Conclusion: SGM is a rare form of metaplasia of esophageal epithelium. The incidence was extremely low. The low incidence rate may be attributed to low biopsy rate of esophagus. Biopsies from the esophagus were taken for the suspicion of

malignancy, Barret's esophagus, or candidiasis. Sometimes these small plaque-like lesions may be ignored for their non-specific appearance.

Differential diagnosis between esophageal SGM, submucosal tumors and mucosal proliferative lesions should be made. The most similar benign flat lesion in the esophagus was glycogenic acanthosis. Biopsy was necessary for the diagnosis of SGM.

The symptoms of the patients with SGM were non-specific. Basically, this disorder resulted in no symptoms, and treatment was not necessary. Some literatures mentioned about inflammatory changes around the SGM, and proposed that SGM was secondary change to reflux esophagitis. However, according to our study, this lesion mostly occupied mid-portion of esophagus, not the lower portion. Therefore, no relationship was found between SGM and reflux esophagitis.

Our series revealed that SGM as an incidental finding of endoscopy. The clinical significance of SGM remained to be further clarified.