

Answer

Primary Adenocarcinoma

Pathological examination of a frozen tissue section revealed superficial adenocarcinoma with no evidence of metastatic melanoma. The final microscopic report indicated well-differentiated adenocarcinoma (pTisN0M0) with mucinous metaplasia and high-grade dysplasia.

While the presumptive diagnosis for this patient was melanoma to the gallbladder owing to his history of previous metastatic melanoma to the brain and stomach, this case demonstrates that histological analysis is mandated despite clinical impression. Primary adenocarcinoma of the gallbladder is the sixth most common gastrointestinal malignant neoplasm and affects approximately 9000 patients in the United States each year.¹ Patients often are asymptomatic and do not present until late in the course of illness, leading to the generally poor prognosis. On imaging, there are 3 common presentations for gallbladder adenocarcinoma. The most common appearance (55%) is that of the gallbladder replaced by a mass. The second most common appearance (25%) is one of focal or diffuse wall thickening. Finally, the third appearance is one with polypoidal masses.²

It has been demonstrated that the survival in these patients is heavily correlated with the American Joint Committee on Cancer TNM staging system. For patients with stage IA (T1N0M0) or stage IB (T2N0M0) disease, cholecystectomy is often curative, with a 70% to 90% 5-year survival rate. However, stage III disease and above (T4, any N, M0) is often not surgically curable and has a 1-year survival of less than 5%.³

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3. Schottenfeld D, Fraumeni J. *Cancer Epidemiology and Prevention.* 3rd ed. Oxford, England: Oxford University Press; 2006:787-800.

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