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**Authors:**  
Eva Marín-Serrano, Ana Barbado Cano

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## Intraductal papillary neoplasm of the bile duct: a recurring disease

Eva Marín-Serrano and Ana Barbado Cano

Digestive Medicine Unit. Hospital La Paz. Madrid, Spain

**Correspondence:** Eva Marín-Serrano

**e-mail:** [evamarins@hotmail.com](mailto:evamarins@hotmail.com)

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*Dear Editor,*

Intraductal papillary neoplasm of the bile duct (IPNB) is a premalignant disease characterized by its low incidence and high risk of malignant transformation (1,2).

### Case report

We hereby report the case of a 76-year-old female under surveillance due to asymptomatic dissociated cholestasis and mild segmental dilation of the left intrahepatic bile duct (L-IHBD). There was no evidence of an underlying obstructive cause on the magnetic resonance cholangiopancreatography (MRCP). An endosonography identified a focal dilation of the L-IHBD close to the hepatic hilum, with an 8-mm hyperechogenic image within it. This was compatible with a tumor (Fig. 1) due to the uptake of Sonovue® in the arterial phase. A staging computed tomography (CT) scan ruled out distant disease and revealed soft-tissue material inside the L-IHBD. After presenting the case to the Tumor Committee, a surgical resection of the lesion was agreed upon and the need for cytological confirmation by endosonography-guided puncture was ruled out. Complete resection of the IPNB with low-grade dysplasia without vascular/perineural invasion or nodal involvement in the surgical piece was achieved via a left hepatectomy. A MRCP performed one and a half

years later showed recurrence of the disease in the right IHBD. A new endosonography was therefore not requested.

### **Discussion**

Endosonography can be useful to detect small left IPNBs that are not picked up by other imaging techniques. However, early diagnosis and complete oncological excision of an IPNB without signs of malignancy require a close follow-up, as the disease may be multifocal and recurrent (3).

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Fig. 1. Endosonography image of an intraductal papillary neoplasm of the bile duct.