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## A REPORT OF A CASE OF MALIGNANT INSULINOMA WITH LIVER METASTASIS

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A 47-year-old man was admitted to our department because of progresive cardiopalmus, trumor of hands and diaphoresis at hunger for two months. Cerebrovascular disease was diagnosed for two times because of coma at night. and every times, the patient recovered immediately following drip treatment. At the beginning, CT scan revealed a normal brain and a doubtful pancreatic lesion. In the period of hospitalization, the patient repeatedly developed the symptoms of hypoglycemia, which always relieved in 3-5 minutes after eating sugar. The blood glucose was 1.6 mmol/L and serum insulin was 160 µ u/ml when the hypoglycemia was developing. Ultrasonic examination displayed abnormal area (2 cm in diameter) in the head and the uncinate process of pancreas and an enlarged liver and multiple parenchymal lesions in the liver. Futher CT scan showed hepatic enlargement and a huge mass at the posterior segment of the hepatic right lober, and multiple parenchymal lesions in the liver. The CT also showed enlargement of the head of pancreas with disturbance of structure and a mass (2×2 cm in size) with uneven enhancement in the uncinat process. Laboratorial examination: serum AFP was 54 μ g/L, CEA 8.8  $\mu$  g/L, ferritin 222  $\mu$  g/L. Needle biopsy of the liver showed some acinous structures which were composed of polygonal cells, like the chrysanthemum. The edges of the cells were

not clear, the cytoplasm was seldom and transparent or light pink color, the nucleus is circular or oviform with the same size, its chromatin was stained uniformly without nucleole. The nucleus of the tumor cells were low-grade heteromorphy, and the pathologic mitosis can be found occasionally. There were a small number of vessels in the tumor and some compression atrophy of the hepatic tissues around the tumor. The pathology diagnosis was metastatic malignant insulinoma of liver. The patient and his families refused the operation and left our hospital. Twelve days later, he died.

## Discussion

Malignant insulinoma with liver metastasis is a rare disease. There was only one case in 47 cases of insulinoma that were reported by Ruijin Hospital. It was also the only one case to be reported in our country before. It is difficult to distinguish the malignant insulinoma from the benign one in morphologory. The most reliable difference between them is metastasis of other organ. Some authors thought that the turnor should be resected, even the metastasis is present, because the progress of the turnor is slow. Although the operation is not a radical one in this condition, it can prolong the patient's life.

(Accepted August 10, 1996)