
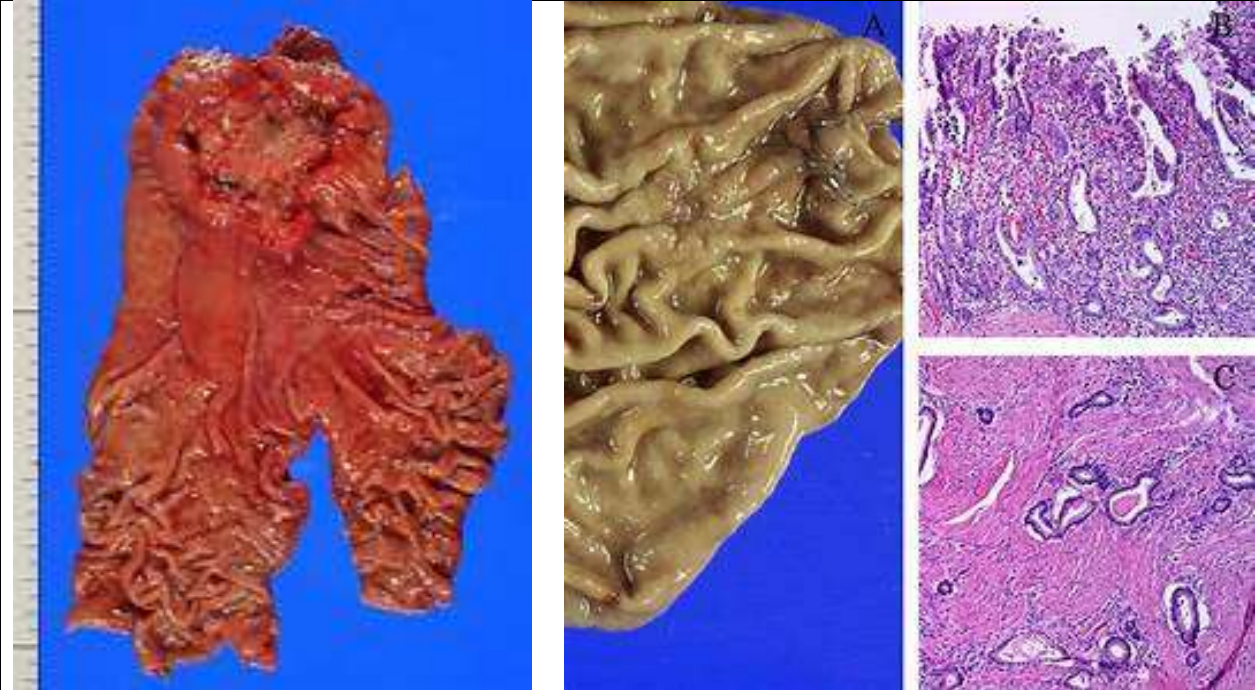
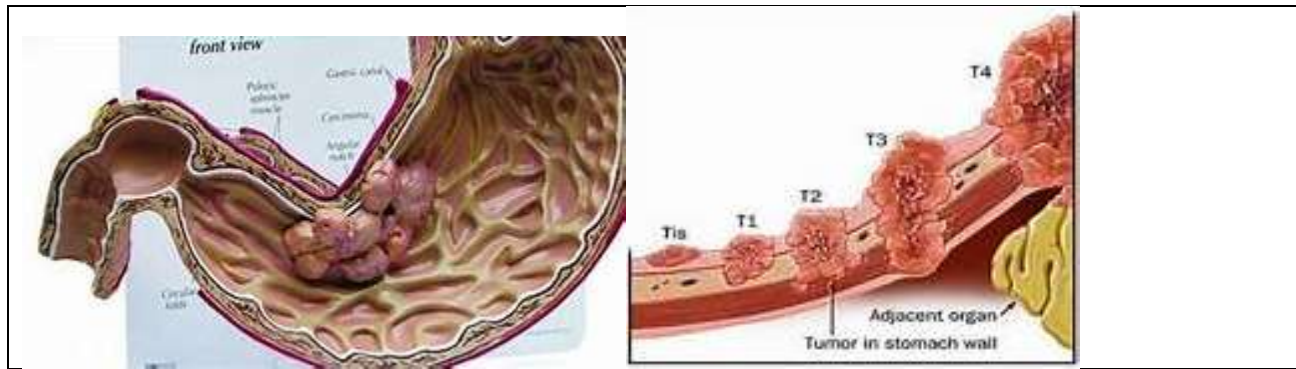


XVII. Diseases of the Digestive System

<b>Carcinoma (scirrhus) III-3.557</b>			
<b>Stomach:</b>	<b>Peritoneal surface:</b>	Shows pale slightly-raised plaques	
	<b>Cavity:</b>	Is dilated (distended)	
	<b>Wall:</b>	Shows a tumour	
<b>The tumour:</b>	<ul style="list-style-type: none"> <li>• Is localized to the pyloric region</li> <li>• Has encircled the pyloric antrum</li> <li>• Moderate in size</li> <li>• Rather uniform in thickness</li> <li>• Greyish or yellowish-white</li> <li>• Firm in consistence</li> </ul>		
<b>Pylorus:</b>	<b>Wall:</b>	<ul style="list-style-type: none"> <li>• Thickened</li> <li>• Replaced by tumour-tissue</li> </ul>	
	<b>Antrum:</b>	<ul style="list-style-type: none"> <li>• Narrowed Inner</li> </ul>	
	<b>Surface:</b>	<ul style="list-style-type: none"> <li>• Slightly nodular</li> </ul>	
<b>Lymph nodes (regional):</b>		<ul style="list-style-type: none"> <li>• Slightly enlarged</li> <li>• Infiltrated by the tumour-tissue (malignancy)</li> </ul>	
<b>N.B.:</b>			
<ul style="list-style-type: none"> <li>• Carcinoma may occur at any part of the stomach but chiefly at the pyloric and prepyloric regions (<b>60—70% of cases</b>).</li> <li>• There seems to be more cases of blood-group A in cases of gastric cancer.</li> </ul>			
			






### **Carcinoma (encephaloid = medullary) III -3.558**


<b>Stomach:</b>	Shows a tumour		
<b>The tumour:</b>	<ul style="list-style-type: none"> <li>• Fills a great part of the stomach-cavity</li> <li>• Is fungating (polypoid)</li> <li>• Partially ulcerated</li> <li>• Irregularly-covered by an inflammatory necrotic tissue</li> <li>• Non-capsulated</li> <li>• With foci of necrosis (pale or dirty yellow)</li> <li>• Areas of congestion and haemorrhages (dark red)</li> <li>• Is opaque pale greyish or yellowish-white</li> <li>• Soft in consistence</li> </ul>		
<b>Lymph nodes (regional):</b>	Slightly enlarged		
<b>N.B.:</b>	<ul style="list-style-type: none"> <li>• This polypoid, <b>cauliflower-like</b>, type which projects in the stomach-cavity is liable to ulceration and infection.</li> <li>• It may start as malignant or may be</li> <li>• A malignant transformation of a benign adenomatous polyp.</li> </ul>		

## **Types/SubTypes(Early Gastric Cancer)**

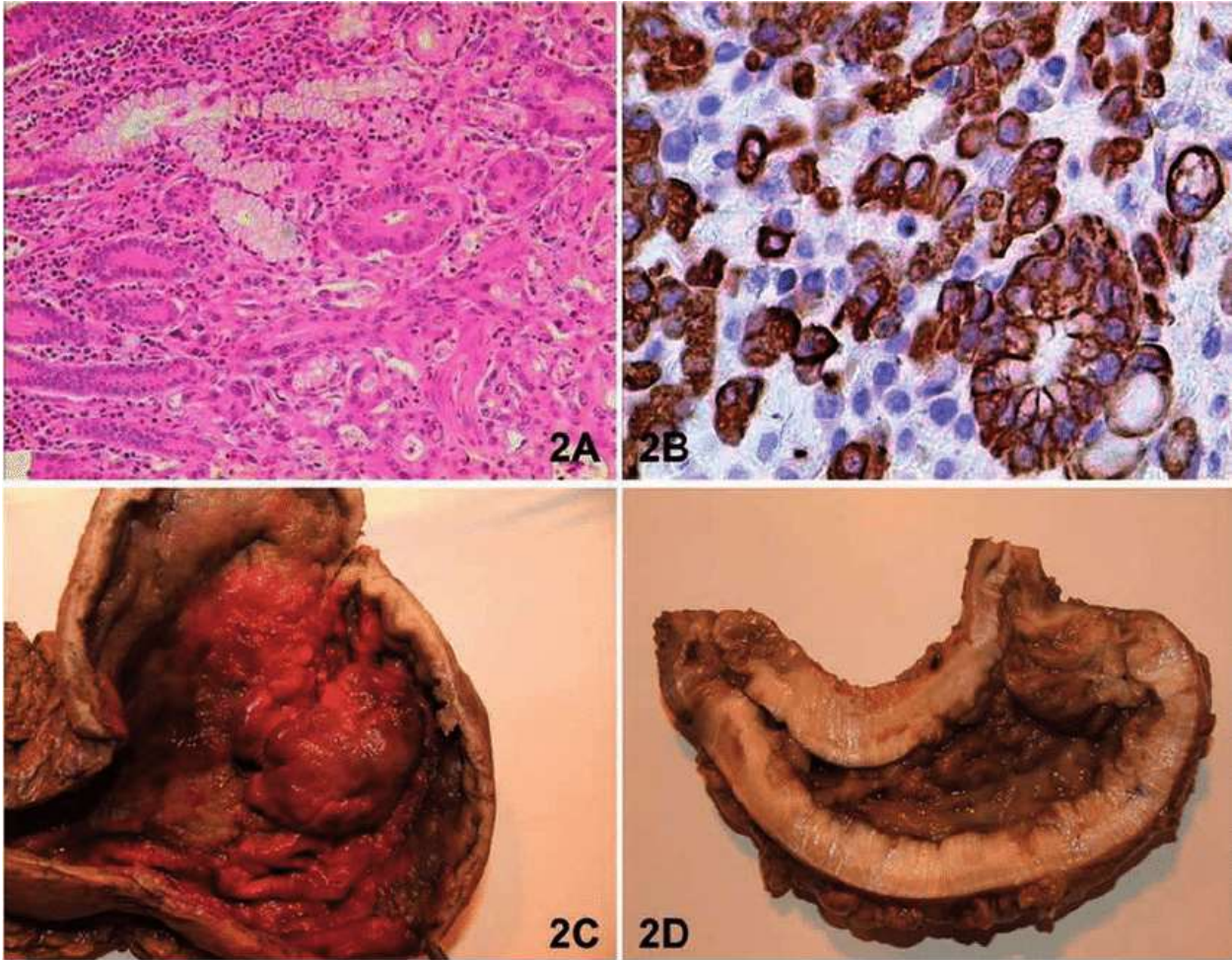
- **Type I** Exophytic lesion extending into the gastric lumen
- **Type II** Superficial variant
  - IIA** Elevated lesions with a height no more than the thickness of the adjacent mucosa
  - IIB** Flat lesions
  - IIC** Depressed lesions with an eroded but not deeply ulcerated appearance
- **Type III** Excavated lesions that may extend into the muscularis propria without invasion of this layer by actual cancer cells

		
<p><b>Figure 125</b>  <b>Nature</b> Scirrhus Carcinoma (stomach; pyloric end)  <b>Specimen No.</b> III-3.557  <b>Reference P.</b> 230</p>	<p><b>Figure 126</b>  <b>Nature</b> Diffuse Carcinoma (stomach)  <b>Specimen No.</b> III-3.55Y  <b>Reference P.</b> 230</p>	<p><b>Figure 127</b>  <b>Nature</b> Ulcerative Carcinoma (stomach)  <b>Specimen No.</b> III-3.55Y  <b>Reference P.</b> 231</p>

### FACTORS INCREASING THE RISK OF GASTRIC CANCER

<p><b>Age</b></p>  <p>Occurs mostly in people older than 55</p>	<p><b>Gender</b></p>  <p>Affects men twice as often as women</p>	<p><b>Genetics</b></p>  <p>Mutations on <i>BRCA1</i> or <i>BRCA2</i> &amp; <i>CDH1</i> genes increase the risk</p>	<p><b>Family History</b></p>  <p>Increases the risk</p>	<p><b>Population Race</b></p>  <p>More common in Asian, Hispanic, Black people than White people</p>	 <p>Obesity</p>  <p>Smoking</p>  <p><i>Helicobacter pylori</i> (<i>H. pylori</i>) infection</p>
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<b>Carcinoma (diffuse = infiltrative) III- 3.558</b>			
<b>Stomach:</b>	<ul style="list-style-type: none"> <li>• Small in size</li> <li>• Contracted</li> </ul>		
	<b>Wall:</b>	<ul style="list-style-type: none"> <li>• Thickened (up to 2 cm.)</li> <li>• Infiltrated by a tumour tissue</li> </ul>	
	<b>Mucosa:</b>	<ul style="list-style-type: none"> <li>• Flattened and fused to underlying wall</li> </ul>	
<b>The tumour:</b>	<ul style="list-style-type: none"> <li>• Diffuse throughout the wall (malignancy)</li> <li>• Greyish-pinkish-white</li> <li>• Firm in consistence (firm-to-hard)</li> </ul>		
<b>N.B.:</b>			
<ul style="list-style-type: none"> <li>• This is the so-called "<b>leather-bottle type of carcinoma</b>" or "<b>linitis plastica</b>".</li> <li>• There is a form which is more localized at the pylorus or prepyloric zone and which leads to pyloric-stenosis (and obstruction) as well as gastric dilatation.</li> </ul>			



## Pathologic types of early gastric cancer

