105年07月份中部地區消化系同好會

時 間:民國 105 年 07 月 07 日下午 17:20-19:10 時

地 點:林酒店

住 址:台中市西屯區朝富路99號(台灣大道路口)

主持人:何明印主任、楊聰鎰主任

會議內容:一、病例報告

二、專題演講

一、病例報告

主持人:楊聰鎰主任

討論方式:病例報告每題演講時間十五分鐘,討論時間五分鐘 1.17:20~17:40

A 77-year-old woman suffered from right flank pain and RUQ pain for 4 days. She was referred from LMD under the suspicion of GB stone. At ER, vital signs: BP 129/83 mmHg PR 84/min RR 20/min BT 38.1°C SPO2 92%. PE showed RUQ tendrness. Bedside sonography suspect a huge liver tumor and abdominal CT was arranged. Initially cholangiocarcinoma with liver metastasis or other metastasis lesion was suspected. Biopsy was suggested but the pathology showed a rare disease.

2. 17:40~18:00

Lipasemia and intractable ascites in a 39 y/o male ---- One case report

A 39 y/o male who is a heavy drinker for 15 yrs. He suffered from alcoholic pancreatitis, but not subside and followed prolonged lipasemia and intractable ascites during two months. The patient had ERCP and MRI examination.

<u>江承源</u> 張家熙 曾晟恩 余承儒 問仁偉 鄭庚申 中國醫藥大學附設醫院 內科部消化系

3. 18:00~18:20

Biliary tract cancer presenting as pyogenic Liver Abscess

<u>陳育佐</u> 何明印 楊聰鎰 黃泰銘 衛福部豐原醫院 胃腸肝膽科

Cholangiocarcinomabiliary tract cancer presenting as pyogenic liver abscess is a very rare entity with only a few case reports to date reported in world literature. Malignancies may present as liver abscess secondary to obstruction of the biliary system or obstruction at the porta hepatis due to lymph nodes or lesion itself. But this mode of presentation is uncommon as malignancy is generally diagnosed much before this stage. Other reason for abscess formation may be tumor necrosis and subsequent superadded infection and transformation to an abscess.Primary presentation of malignancy as liver abscess is predominantly reported with metastatic colorectal cancers or neuroendocrine tumors.Biliary tract cancer or hepatocellular carcinoma presenting primarily as liver abscess is extremely rare.

二、專題演講

主持人:何明印主任

18:20~19:10

New Therapeutic Perspectives for HBV Cure

高嘉宏教授 國立台灣大學醫學院附設醫院

Current antiviral therapies have been proven to reduce the progression of chronic hepatitis B (CHB). However, covalently closed circular DNA (cccDNA) of hepatitis B virus (HBV) persists, resulting in viral relapse after the discontinuation of treatment. Several novel agents through viral and host targets approaches are under investigations towards functional cure of HBV. On one hand, direct acting antivirals (DAA) targeting virus itself, such as HBV entry inhibitor, engineered site-specific nucleases and RNA interference, could inhibit intrahepatic HBV infection and eliminate or silence cccDNA transcription. On the other hand, host targeting agents could induce non-cytolytic destruction of cccDNA or attack HBV-infected hepatocytes. With these promising approaches, we hope to reach global HBV control in the middle of this century.