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【 PICTURES IN CLINICAL MEDICINE 】

Durvalumab-induced Severe Gastritis

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Key words: durvalumab, gastritis, irAE, lung cancer

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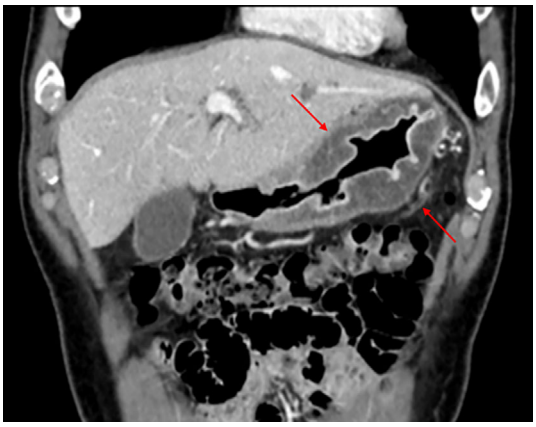
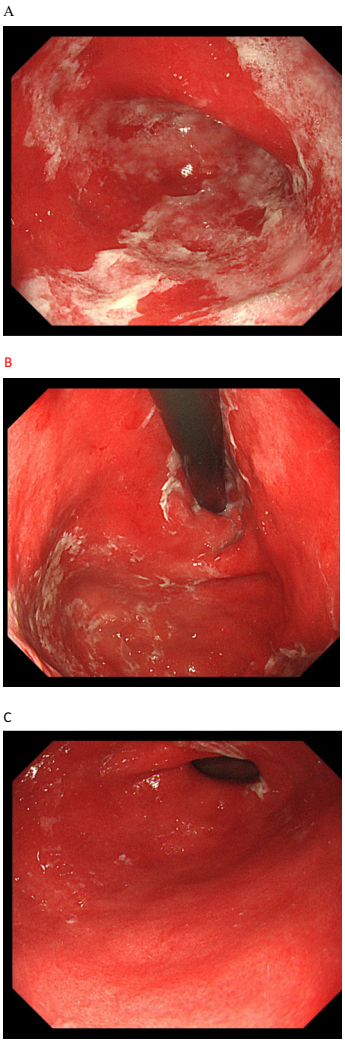


Picture 1.

A 60-year-old man with lung adenocarcinoma (cT4N2M0, stage IIIA) was treated with the immune checkpoint inhibitor (ICI) durvalumab as maintenance therapy after chemoradiotherapy. The lesions showed no growth on completion of 23 cycles of durvalumab. Five months later, the patient presented with anorexia and epigastric pain. An examination revealed severe abdominal tenderness. He had no history of *Helicobacter pylori* eradication. The anti-*H. pylori* IgG antibody value was 6.9 U/mL, and a stool antigen test was negative. Abdominal contrast-enhanced computed tomography (CT) demonstrated marked diffuse thickening of the gastric wall (Picture 1). During gastroscopy, before washing out the gastric mucosa, the white membrane strongly adhered to the mucosa of the gastric lower body (Picture 2A). Gastroscopy showed redness and edema of the mucosa (Picture 2B). There was no atrophy, erosion, or ulcer in the gastric mucosa (Picture 2C). A biopsy at the greater curvature of the gastric middle body showed severe inflammation and regenerative epithelium accompanying lymphocytic infiltration into the peri-gland. No *H. pylori* or intestinal metaplasia was identified (Picture 3). Severe gastritis, an immune-related adverse event (irAE) caused by durvalumab, was suspected. Therefore, he was treated with methylprednisolone (500 mg/day intravenously for 3 days) followed by oral corticosteroid (0.5 mg/kg/day). By one month later, his



Picture 2.

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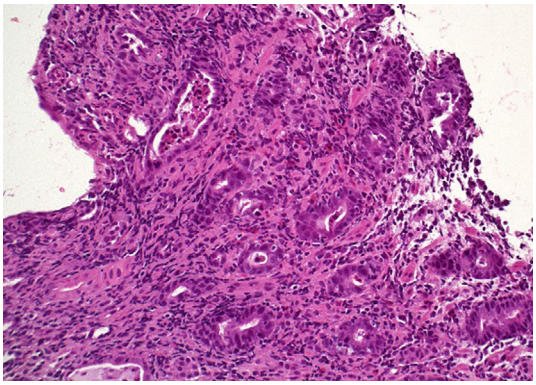
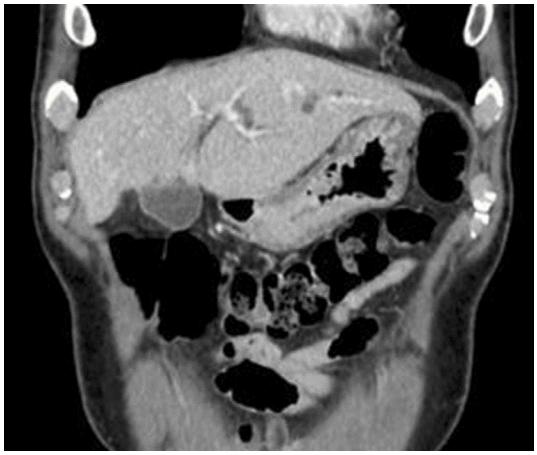


Picture 3.



Picture 4.

symptoms and CT findings had improved (Picture 4). IrAEs may affect any organ system and occur at any time after treatment with ICIs. Colitis is a typical gastrointestinal irAE (GI-irAE), while gastritis is extremely rare. GI-irAEs comprise 1.5% of all irAEs, of which gastritis makes up 20% (1). In patients with ICI-induced gastritis, corticosteroids are indicated. Immunosuppressants are occasionally also required (2).

The authors state that they have no Conflict of Interest (COI).

References

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