Images in Clinical Medicine

Pancreatic head cancer in a patient with complete agenesis of dorsal pancreas

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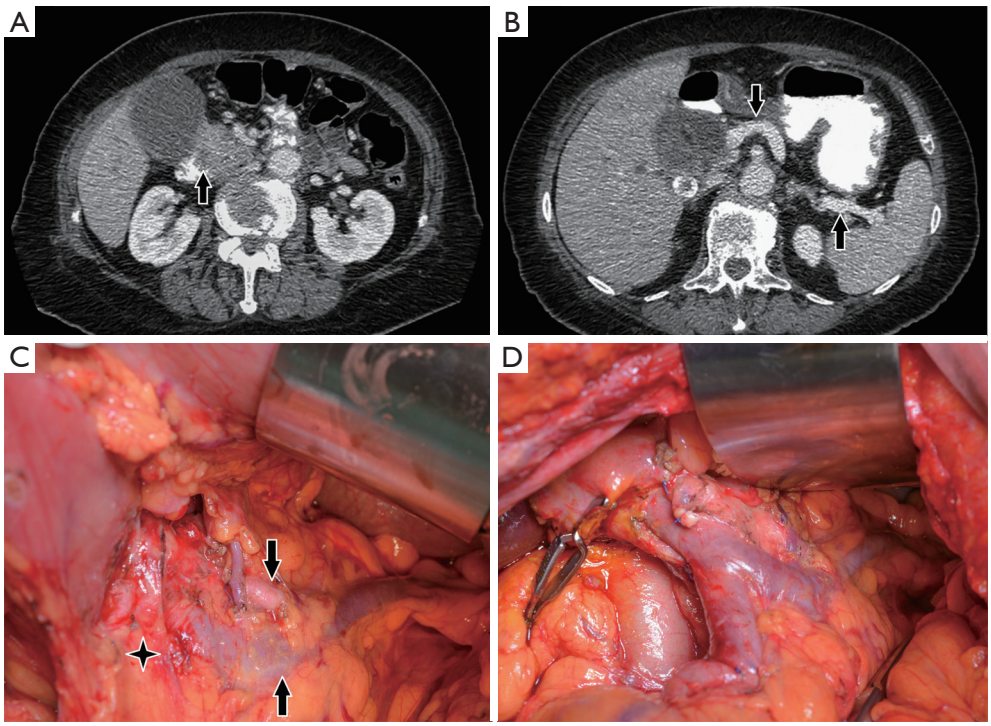

A previously healthy 65-year-old female patient was admitted to our hospital due to painless obstructive jaundice of 1 week duration. Laboratory investigation showed elevated serum bilirubin, alkaline phosphatase and gamma-glutamyl transferase levels, with no other significant abnormalities. A contrast-enhanced computed tomography revealed a hypovascular lesion in the head of the pancreas (arrow, panel A), with an absence of body and tail of the gland near the splenic vessels (arrows, panel B).

A pancreatoduodenectomy was scheduled. Laparotomy revealed tumor in the pancreatic head (asterix, panel C) causing obstructive jaundice, as well as complete agenesis of dorsal pancreas. Only peritoneum and thin rim of subperitoneal fat covered the splenic artery and vein (arrows, panel C). The patient underwent pancreatoduodenectomy, which in an absence of body and tail of the pancreas was equal to total pancreatectomy (panel D). Postoperative course was uneventful, except of the need to strictly control serum glucose levels, as the patient expectedly developed postpancreatectomy insulin-dependent

diabetes. Histology of the resected specimen revealed pT1pN0M0 pancreatic ductal adenocarcinoma with clear (R0, >1 mm) resection margins.

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None.

Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

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