

11TH GLOBAL GASTROENTEROLOGISTS MEETING

June 12-13, 2017 Rome, Italy

Intraductal tubulopapillary pancreatic head carcinoma on the background of ITPN with total pancreas involvement, complicated with massive GI bleeding and jaundice: Case report and review of the literature

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Intraductal tubulopapillary neoplasm (ITPN) is a very rare pancreatic tumor. A 36-year old woman was referred to ICU department of our hospital for massive upper GI bleeding and jaundice. After stabilization CT and endoscopy showed a non-mucinous tumor of the pancreatic head invading duodenum with a large crater of the vertical branch. Intraductal spread along the pancreas was suspected without any sign of dissemination. Six days after decompression of bile system and correction of coagulopathy Whipple procedure was performed and pancreatectomy was completed because of repeated positive margins on the levels of pancreatic body and tail. Uneventful postoperative course was done. 38 disease-free months after total duodenopancreatectomy, this woman successfully gave birth to the healthy child. Histopathology revealed massive intra-ductal tubulopapillary carcinoma of the pancreatic head with invasion of the duodenum on the background of ITPN of the pancreatic body and tail. This is the 31st description of ITPN, the first case of such a tumor, complicated with massive GI bleeding and jaundice and the first case of successful childbirth after total pancreatectomy for this type of pancreatic cancer.

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