Article 6



Images in clinical medicine



Giant cystic pancreatic mass

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Giant Cystic Pancreatic Mass

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Image in medicine

A 47 years old Caucasian woman presented to the Emergency department with significant abdominal pain, vomiting and abdominal distension. She denied any medical history and any therapy. Her vital signs were: blood pressure, 130/70 mmHg, respiratory rate 30 breaths/minute, heart rate 70 beats/minute and temperature of 36°C. Oxygen saturation was 95% on room air. The abdominal examination showed an abnormal mass in epigastric region. Thoracic examination reported reduced vesicular murmur. Laboratory evaluation revealed normal leukocytosis with a White Blood Cell (WBC) count of 9 per mm³. Arterial Blood Gases (ABG) was normal. Abdominal Computed Tomography revealed a giant cystic mass in left pancreas and adhesion with stomach and colon transversum. An open laparotomy showed a





voluminous cystic lesions in distal pancreas. En-bloc spleno-pancreatectomy following trasversum resection and colo-colonic anastomosis was performed. Histopathological findings showed a 14 x 9 cm mucinous adenoma with cellular atipias.

After a pancreatic fistulas Grade A, the patient was discharged 10 days after.



Figure 1: abdominal computed tomography revealed a giant cystic mass in left pancreas and adhesion with stomach and colon transversum