

Central pancreatectomy for a pancreatic metastasis of colon cancer – a case report

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ABSTRACT

Background: Isolated pancreatic metastases of other neoplasms are an uncommon pathology, particularly with a colo-rectal cancer origin. Surgery represents the single hope for a long-term survival in these patients, but most of the previously reported patients in the literature underwent standard pancreatic resections. A central pancreatectomy is a non-standardized pancreatic resection, which was exceptionally reported for a malignant pathology.

Case presentation: A 30-years old male, with previously left hemicolectomy for a sigmoid colon adenocarcinoma and left hemi-hepatectomy for liver metastasis, developed an isolated pancreatic isthmus metastasis, which was treated with a central pancreatectomy.

Results: The early postoperative outcome was complicated by a splenic infarction, which required splenectomy. A margins negative resection was observed at the final pathology examination. The patient died with peritoneal recurrence 28 months after the pancreatic resection.

Conclusion: A central pancreatectomy appears to be an oncologically safe surgical procedure for isolated pancreatic metastases of other neoplasms, in selected patients.

Key words: central pancreatectomy; pancreatic metastases; prognosis

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