

An Unusual Presentation of Advanced Pancreatic Cancer: Coeliac Axis Occlusion and Acute Upper Gut Ischemia

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Abstract

We present a case of a fifty-year-old male with acute thrombosis of the celiac trunk secondary to advanced pancreatic cancer. He was admitted to the emergency department with a 4-day history of upper abdominal pain and coffee ground vomitus. Abdominal examination showed signs of generalized peritonitis. CT abdomen was done without contrast because of impaired renal function. The findings consisted of a large pancreatic neck and body mass, fat stranding, free fluid and distended bowel loops. Emergency laparotomy revealed a voluminous pancreatic mass arising from the neck and body of the pancreas, with the coeliac trunk being completely infiltrated by the tumour. A gangrenous stomach and lower oesophagus with big gastric perforation were also noted. The patient also had extensive splenic infarction, however the liver was normal. He became unstable during surgery and nothing could be done. He did not recover from anaesthesia and died in the ICU after 24 hours.

Key words: coeliac-axis occlusion gut ischemia pancreatic cancer