

Heterotopic pancreas: a difficult diagnosis

A 45-year-old man was admitted to our hospital complaining of epigastric pain and nausea for 2 days. He had no history of systemic disease. Laboratory tests at admission, including amylase, were normal except for a $12\,100/\text{mm}^3$ leucocyte count (89% polymorphonuclear). Abdominal ultrasonography revealed an irregular, hypoechoic solid lesion of 37×28 mm, and computed tomography scan showed a 37-mm, thick-walled, extraluminal cystic lesion.

Gastroscopy revealed a submucosal lesion at the antrum of the stomach with a necrotic eschar on its surface (► Fig. 1; ► Video 1). Endoscopic ultrasonography showed a heterogeneous lesion suggesting muscular layer necrosis. The patient was successfully treated surgically by subtotal gastrectomy. Pathological examinations confirmed a diagnosis of aberrant pancreas (► Fig. 2).

Heterotopic pancreas is the presence of pancreatic tissue lying outside of its normal location and lacking anatomic or vascular connections with the pancreas [1]. It is located in the antrum in 85%–95% of cases, and it is usually asymptomatic but may become clinically evident depending on the size, location, and the pathological changes [2]. In some cases, because the findings on imaging studies are not specific for aberrant pancreas, its pre-operative definitive diagnosis is difficult [3]. The definitive diagnosis of aberrant pancreas is attained on histopathological examination and it should always be considered in the differential diagnosis of gastric masses.

Video 1

Gastroscopy revealed a submucosal lesion at the antrum of the stomach with a necrotic eschar on its surface.

Competing interests: None

Endoscopy_UCTN_Code_CCL_1AB_2AC_3AB

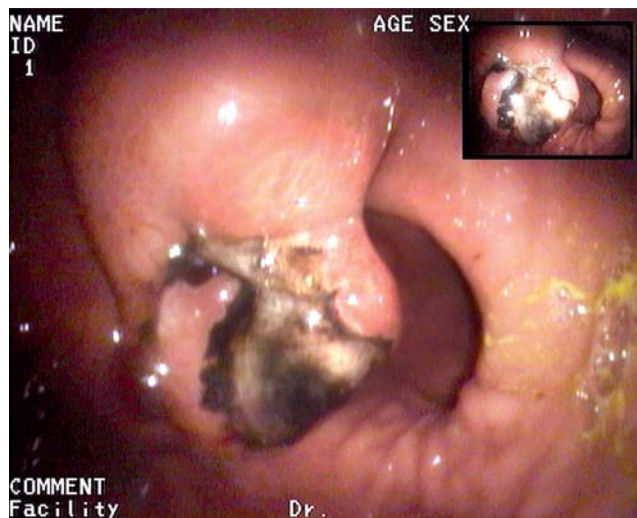


Fig. 1 Gastroscopy revealed a submucosal lesion at the antrum of the stomach.

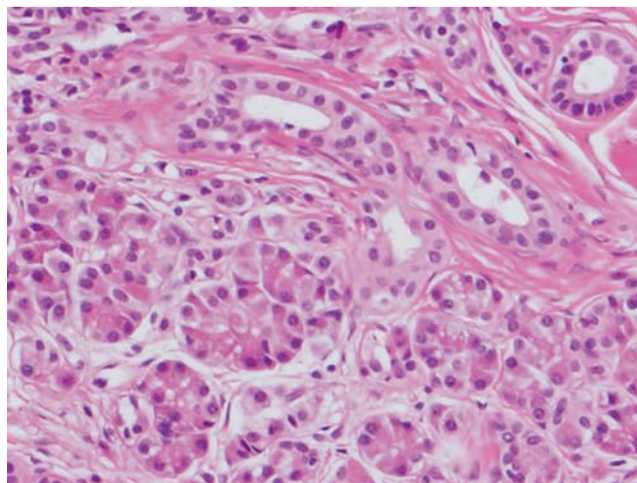


Fig. 2 Pathological examination confirmed a diagnosis of aberrant pancreas.

G. Payeras¹, C. Castellón², J. De Jaime², R. Barranco¹, A. Calvache¹, P. Castro¹

¹ Digestive Endoscopy Unit, Department of Gastroenterology, Hospital Infanta Elena, Madrid, Spain

² Department of Surgery, Hospital Infanta Elena, Madrid, Spain

Bibliography

DOI 10.1055/s-0029-1243988

Endoscopy 2010; 42: E121

© Georg Thieme Verlag KG Stuttgart · New York ·

ISSN 0013-726X

Corresponding author

G. Payeras, MD

Digestive Endoscopy Unit
Department of Gastroenterology

Sanatorio San Fco. Asís
Joaquín Costa 28 Madrid
Madrid 28002

Spain

Fax: +34-91-4113839

gpayeras@yahoo.es

References

- 1 Akaraviputh T, Manuyakurn A, Lohsiriwat V. Diagnosis by endoscopic ultrasound of a large aberrant pancreas mimicking malignant gastrointestinal stromal tumor of the stomach. *Endoscopy* 2009; 41: 573
- 2 Kobayashi S, Okayama Y, Hayashi K et al. Heterotopic pancreas in the stomach which caused obstructive stenosis in the duodenum. *Intern Med* 2006; 45: 1137–1141
- 3 Christodoulidis G, Zacharoulis D, Barbanis S et al. Heterotopic pancreas in the stomach: a case report and literature review. *World J Gastroenterol* 2007; 13: 6098–6100