

Gastrointestinal stromal tumor (GIST) presenting with acute pancreatitis

A 58-year old woman presented with constant epigastric abdominal pain radiating to her back, of 1 week's duration. The patient had associated nausea, vomiting, anorexia, and weight loss. Physical examination revealed midepigastric tenderness without a palpable mass. Pertinent laboratory values included serum amylase of 410 units/L and lipase of 471 units/L. Abdominal computed tomography (CT) scan revealed a 6-cm cystic mass between the stomach and pancreas, as well as mild pancreatitis (► Fig. 1). Upper endoscopy showed extrinsic compression of the stomach along the lesser curvature, prohibiting passage of the scope to the pylorus. Endoscopic ultrasound revealed a 6 × 6-cm heterogeneous, well-rounded mass with calcifications and a calcified rim originating from the gastric mucosa, along with upstream dilation of the pancreatic duct to 1 cm (► Fig. 2). Fine-needle aspiration revealed spindle cells. During surgery, a well-rounded mass originating from the gastric antrum was found to have prolapsed into the second portion of the duodenum, obstructing the pancreatic duct. The patient underwent a partial resection of the anterior gastric wall. Final surgical pathology revealed diffuse c-kit positivity, confirming the mass was a gastrointestinal stromal tumor (GIST). Postoperatively, the patient's pancreatitis resolved, and she has not had a recurrence of her pancreatitis.

Although there are reports of duodenal GISTs mimicking pancreatic cancer, there are no known reports where acute pancreatitis (fulfilling two of three criteria) is secondary to a GIST [1]. In conclusion, we report a rare case of gastrointestinal stromal tumor presenting as acute pancreatitis, which, to our knowledge, is the first reported case in the literature.

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Competing interests: None



Fig. 1 **a** Gastrointestinal stromal tumor (GIST) obstructing the pancreatic head, with upstream dilation. **b** Prolapsed GIST protruding into the duodenum and obstructing the pancreatic duct.

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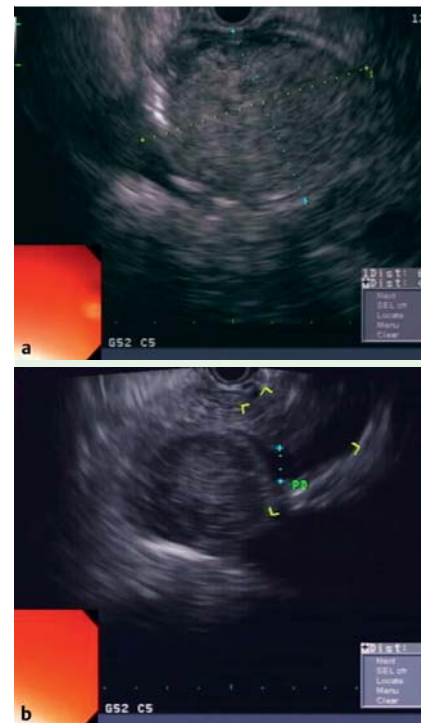


Fig. 2 **a** Endoscopic ultrasound (linear view) revealing a 6 × 6-cm gastrointestinal stromal tumor (GIST). **b** Endoscopic ultrasound (linear view) revealing GIST-induced dilatation of the pancreatic duct to 1 cm.

References

- 1 Soufi M, Chad B. Stromal duodenal tumor revealed by an acute pancreatitis: report of a case. *J Gastrointest Canc* 2010; 41: 88–91

Bibliography

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