Cystic Lesions of the Pancreas: Clinical and Pathologic Review of Cases in a Five Year Period

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ABSTRACT

Context Cystic lesions of the pancreas represent an important subgroup of pancreatic tumors. The characterization and of these has evolved in recent years, and will continue to change according to the increasing number of biopsies and resections performed. Design Pancreatectomy specimens containing cystic lesions and collected over a five-year period were reviewed. Demographic and pathologic features were recorded. Cases were subclassified in diagnostic categories and were grouped according to the nature of the lesion (non-neoplastic vs. neoplastic). Results Of 361 pancreatic lesions, 97 cysts corresponding to 95 patients were studied. The patients’ mean age was 60 years. Sixty two cases (63.9%) occurred in women. Among the 97 cysts, five (5.1%) were non-neoplastic and 92 (94.9%) were neoplastic (59.8% benign, 17.5% borderline, 17.5% malignant). Intraductal papillary mucinous neoplasm was the most common diagnosis (52.5%) followed by serous cystic neoplasm (20.62%) and mucinous cystic neoplasm (13.4%). Excluding patients with solid pseudopapillary tumor who were significantly younger (P=0.001), patients with borderline and malignant neoplasms were older than patients with benign neoplasms. Solid pseudopapillary tumors were significantly larger than other neoplasms (P<0.001). Jaundice and weight loss as presenting symptoms correlated with malignancy (P<0.01). Conclusion Cystic lesions are found in 20.6% of all pancreatectomy specimens. Among this heterogeneous group, benign neoplasms predominate, particularly those with mucinous lining. Age at presentation, gender, location and tumor size are highly variable, with the exception of solid pseudopapillary tumor. Clinical presentation, diagnostic imaging and laboratory data should be consistently reported to improve the therapeutic approach.