CLINICAL SNAPSHOT

Giant Intraductal Papillary Mucinous Neoplasia (IPMN) of the Pancreas with Malignant Degeneration

Sonography in a 75-year-old man with cingulate upper abdominal pain showed an greatly enlarged pancreas with multiple cystic elements. Magnetic resonance cholangio-pancreatography (MRCP) identified a huge (6 × 7 × 16 cm) mucinous mass arising from the main pancreatic duct (arrows). Magnetic resonance imaging (MRI) revealed several contrast-enhancing nodular tumor elements, some of them large, leading to the diagnosis of an extraordinarily large main duct intraductal papillary mucinous neoplasia (IPMN) of the pancreas of with suspected

malignant degeneration. Although cytology of solid tumor samples harvested by endosonographically guided aspiration showed no sign of malignancy, the high risk of degeneration of large main duct IPMNs (circa 70%) prompted us to carry out complete pancreatectomy, which the patient tolerated well. Pathological examination revealed extensive intraductal proliferation of neoplastic duct epithelium with mucus production (IPMN) of oncocytic type with extended associated invasive carcinoma (T3). This experience confirms that large main duct IPMNs should be treated surgically owing to the high likelihood of malignant degeneration, even in cases of benign cytology.

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