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Laparoscopic Central Pancreatectomy with Pancreato-Gastric Anastomosis for Pancreatic Cystadenoma

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Abstract

We present the case of a 42-year-old woman diagnosed with a cystic pancreatic lesion, suggestive of a serous cystadenoma of 27/13 mm. The diagnosis was established by the examination of abdominal CT and eco-endoscopy. The patient was referred to the surgery department for treatment. The benign etiology suggested by imaging and the desire to preserve the spleen along with as much of the pancreatic parenchyma, indicated a laparoscopic central pancreatectomy with a anastomosis between the distal pancreatic stump and the stomach. The authors reviewed the national and international publications related to the indications of this minimally invasive surgery.

Key words: laparoscopic central pancreatectomy, serous cystadenoma of the pancreas, pancreato-gastric anastomosis