A Wandering Pancreatic Mass

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A 35-year-old woman with an abdominal mass was referred to our hospital. The first contrast-enhanced CT scan showed a large mass with heterogeneous contrast enhancement in the pancreatic head. We diagnosed the mass as a pancreatic neuroendocrine tumor. Two months after the first CT, a CT scan surprisingly showed a shift of the mass to the pancreatic body. At laparotomy, the pancreatic mass without pedunculation existed in the body of the pancreas and was resected by distal pancreatectomy. The pathological diagnosis of the resected pancreatic mass was neuroendocrine tumor of the pancreas.

There have been few reports in English of a wandering abdominal mass. Most such cases are wandering spleen with a cyst (1, 2) and other cases include ovarian cyst (3), pedunculated, gastric leiomyoma, leiomyoblastoma (4) and ileocaecal adenocarcinoma (5) but not pancreatic tumor. A wandering abdominal mass can move due to change in posture or due to distention of the stomach after a meal and can cause severe complications related to torsion or trauma (1, 2), especially in the case of a pedunculated lesion. Although it is thought that pancreatic tumors seldom wander because they are usually nonpedunculated, a large and encapsulated pancreatic mass as in the present case would move due to good mobility. Attention should be given to the possibility of a wandering pancreatic mass as in this rare case.

Conflict of Interest
No conflicts of interest exist for all authors.

A 35-year-old woman with an abdominal mass was referred to our hospital. The first contrast-enhanced CT scan showed a large mass with heterogeneous contrast enhancement in the head to body of the pancreas on the right side of the aorta (A). Two months after the first CT, a CT scan performed before surgery showed a shift of the large mass to the body to tail of the pancreas on the left side of the aorta (B).

Picture 1. The first contrast-enhanced CT scan showed a large mass of 57 mm in size with heterogeneous contrast enhancement in the head to body of the pancreas on the right side of the aorta (A). Two months after the first CT, a CT scan performed before surgery showed a shift of the large mass to the body to tail of the pancreas on the left side of the aorta (B).
References


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