Ectopic pancreas presenting as a submucosal gastric tumor: A case report and literature review

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Case report: A healthy 2-year-old girl presented with acute abdominal pain and low grade of fever. Physical examination was unremarkable, but ultrasonography identified an epigastric mass that appeared as a 4 × 4 cm heterogeneous solid submucosal tumor arising from the posterior wall of the pyloric antrum on enhanced computed tomography. Tumor markers and pancreatic enzymes were normal. Histopathology of a laparoscopy-assisted needle biopsy showed a proliferation of leiomyomatous cells, and a gastrointestinal stromal tumor was suspected. Distal gastrectomy and Billroth 1 reconstruction were performed. The histopathologic diagnosis was ectopic pancreas. The postoperative course was uneventful and she has been asymptomatic for 8 months to date.

Literature review: Although rare, ectopic pancreas can arise from the pylorus, and even less frequently from the stomach (pyloric antrum). However, in the English literature, there have only been 8 cases (including our case) that presented in the stomach in a child (age range: 2 days-15 years). Of these, 5 cases arose from the pyloric antrum and were 2 cm or less in size except for our case. Surgical treatment included enucleation or wedge resection in 4, distal gastrectomy in 2 (including our case), and unavailable in 2.

Conclusion: Our case is the largest in the literature. While treatable by enucleation or wedge resection, our case required distal gastrectomy and Billroth 1. Ectopic pancreas should be included in the differential diagnosis of submucosal gastric tumor in childhood.