

ABDOMINAL PAIN MIMICKING PANCREATITIS: AN UNUSUAL PRESENTATION OF PNET

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INTRODUCCIÓN

Pancreatic neuroendocrine tumors (pNETs) are rare neoplasms whose incidence has increased in recent decades. The presence of non-functional pNETs significantly reduces patient survival, with genetic alterations

MATERIALES Y MÉTODOS

and therapeutic characteristics of this neoplasm, with relevance to surgical management and prognosis, through a case report based on molecular patterns. A 50-year-old female patient underwent a distal pancreatectomy and splenectomy. The samples obtained were analyzed by macroscopic and immunohistochemical studies. The tissues underwent deparaffinization and

RESULTADOS

polyclonal antibodies. A polymer-based detection system was then used. Positive and negative controls were employed to test the reliability of the reactions. The slides were prepared with an automated Bond Max staining system. The results of the macroscopic analysis indicated that the sample size was 3.0 cm, no necrosis, angiolymphatic, or perineural neoplastic infiltration; surgical margin free of neoplastic cells; remaining pancreatic tissue with

CONCLUSIONES

sinusoidal congestion, splenic hilar lymph nodes without signs of neoplastic involvement (0/3), and pathological staging (pTNM - AJCC - 8th ed.). The immunohistochemical report was positive for chromogranin A (clone AE1/AE3), synaptophysin (clone DAK-SYNAP), cytokeratin (clone CAM5.2), PAX8 (clone MRO-50), progesterone receptor (clone 16.5%), and Ki-67 (clone K2, 4%). It was negative for S-100 protein (polyclonal), GATA-3 (clone L50-823), and beta-catenin (clone 17C2), confirming the diagnosis of well-differentiated pNET, histological grade 2.