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A 21-year Experience With Resected Solid Pseudopapillary Neoplasm: A Single Center Retrospective Cohort Study

<u>Soo Yeun LIM</u>, Hye Jeong JEONG, Hyun Jeong JEON, So Jeong YOON, Hongbeom KIM, In Woong HAN, Jin Seok HEO, Sang Hyun SHIN*

Division Of Hepatobiliary-Pancreatic Surgery, Department Of Surgery, Samsung Medical Center, Sungkyunkwan University School Of Medicine, REPUBLIC OF KOREA

Background: Although the incidence of solid pseudopapillary neoplasm (SPN) is less than 2% of total pancreas mass, the prevalence appears to be increasing. Most of its prognosis is benign, but it also shows malignant features. This study was conducted to reveal the clinical outcomes of patients who underwent surgery for SPN at a single center.

Methods: From 2000 to 2020, 217 patients with SPN underwent surgery in Samsung Medical Center and their data were analyzed retrospectively.

Results: Of 217 patients, forty-two patients (19.4%) were male and 175 patients (80.6) was female. The mean age at diagnosis was 40.0 ± 12.6 and the age of diagnosis was older in males than in females ($42.7\pm11.8 \times 39.4\pm12.8$, p=0.103). Eighty-three patients (38.2%) had symptoms at diagnosis. 98.6% of patients had ASA I or II score. The mean size of tumor was 4.4 ± 3.1 cm. The location of tumor was thirty-six patients (16.6%) in pancreas head, sixty-nine patients (31.8%) in pancreas body, and ninety-six patients (44.2%) in pancreas tail, respectively. Thirty-five patients (16.1%) had pancreaticoduodenectomy and 148 patients (16.2%) had distal pancreatectomy. The recurrence was occurred in liver or regional lymph nodes of six patients (16.2%). The mean recurrence free survival was 16.2%0 month. The only factor affecting recurrence was the tumor size in uni- and multivariate analysis (16.2%1).

Conclusions: Because SPN predominates in relatively young women, patients often hesitate to undergo surgery. Nevertheless, as the size is the only factor affecting recurrence, immediate resection is needed for better prognosis.

Corresponding Author: Sang Hyun SHIN (surgeonssh@gmail.com)