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CASE REPORT PANCREATIC CYSTIC LYMPHANGIOMA IN A 43-YEAR- OLD FEMALE: THE FIRST REPORTED CASE IN THE PHILIPPINES

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Background : Pancreatic cystic lymphangiomas (PCL) are extremely rare benign lesions comprising less than 1% of all lymphangiomas and less than 0.2% of all pancreatic cysts. These result from lymphatic flow obstruction. There are only approximately less than 100 reported cases in the literature. Imaging modalities such as computed tomography (CT), magnetic resonance imaging (MRI), and ultrasonography (US) have been widely used in preoperative evaluation. However, these have remained inadequate and can often present a diagnostic dilemma. Frequently, pancreatic lymphangiomas are diagnosed postoperatively after a validated histopathological result.

Methods : A case report will be presented. The patient's data were retrieved and reviewed from MD Portal, St. Luke's Medical Center electronic medical record.

Results : Not applicable

Conclusions : Although these lesions are rare, cystic pancreatic lymphangiomas should be considered in the differential diagnosis of pancreatic cystic lesions. Preoperative diagnosis of pancreatic cystic lesions with conventional radiology is inconclusive. Laboratory investigations are nonspecific. However, with endoscopic ultrasound (EUS-FNA), a preoperative diagnosis can be established to allow conservative management in some cases. Considering that lymphangiomas are benign lesions, a conservative approach is reasonable once tissue diagnosis is made in asymptomatic and in patients with stable lesions. But, these can also be locally invasive and complications such as obstruction, rupture, or infection can happen. Thus, guidelines for proper patient selection for conservative and surgical intervention should be established.

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