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TÍTULO: **Vanek tumor -endo-laparoscopic approach**

OBJECTIVO/

INTRODUÇÃO: Vanek's tumor was first reported in 1949 as a benign gastrointestinal (GI) submucosal alteration, being more prevalent at the stomach (70%) and ileum (20%). This entity corresponds to 0.1% of all gastric polyps, and its diagnosis is mostly incidental when searching for an upper gastrointestinal bleeding cause. The authors present a case and iconography of a Vanek lesion.

MATERIAL E

MÉTODOS: In our report, a 68 year-old male patient was referred to the emergency room for asthenia and a 5-day melena history. He was pale and tachycardic. Analytical examinations: Hg 6.4 mg/dl, INR 5.16. After hemodynamic stabilization and reversal of the anticoagulation pattern, Esophagogastroduodenoscopy was performed: a 4 cm polypoid lesion at the posterior wall of the gastric antrum showed recent bleeding stigmata. Ecoendoscopy and CT scan completed the study of the lesion.

RESULTADOS: Patient was subjected to a transgastric resection by combined endo-laparoscopy, considering the size and location of the lesion. The patient was discharged on the 3rd post-op day. No short or long term complications were recorded. The pathological examination revealed a Vanek Tumor with free surgical margin.

DISCUSSÃO: Although endoscopic resection is the preferred approach for this tumor, surgical approach is indicated in case of large tumors or active bleeding. The authors present this case because of the rare diagnosis and the innovative surgical technique.

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