## **SCIENTIFIC LETTERS**

# Giant pancreatic cystic lymphangioma

Keywords: Pancreatic lymphangioma. Laparoscopy. Pancreatic cystic tumor.

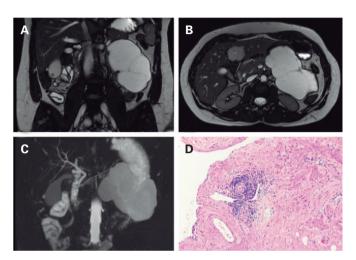
#### Dear Editor,

A giant cystic lymphangioma in the pancreatic body-tail was diagnosed as an incidental ultrasound mass in a 41-yearold patient, with a progressive size that had increased in the last year by about 20 cm size. An ultrasound guided fine needle puncture was performed and the result was a benign cystic lesion. Given the increase in size, a surgical intervention was decided. A retroperitoneal cystic tumor dependent on the posterior pancreatic wall was identified and a full laparoscopic resection with pancreas and spleen preservation was performed. The pathological report confirmed the diagnosis of benign cystic lymphangioma. The patient was discharged on the fifth postoperative day without any remarkable complications. After one year of followup, the patient remains asymptomatic.

### Discussion

Cystic lymphangiomas are benign congenital tumors of the lymphatic system. Those of a pancreatic origin represent < 1 % of all lymphangiomas and only 0.2 % of pancreatic lesions. Although most are initially asymptomatic, they can develop compression symptoms (1). The expression of cytokeratins CD-31, CD-34, VIII-R and D2-40 can help with the differential diagnosis, especially with serous cystadenomas (2). Hurtado-Pardo et al. obtained a 78.5 % of diagnostic sensitivity with a needle puncture, which is similar to previous studies, considering it is the most appropriate diagnostic examination (3).

Standard treatment involves a complete resection with free margins. Although these tumors are usually benign, they



**Fig. 1.** A. Coronal image. B. Axial image. C. Magnetic resonance cholangiopancreatography. D. Microscopic findings.

can invade adjacent organs and may relapse after surgery. A laparoscopic approach is a safe surgical alternative. It improves postoperative pain, facilitates early recovery and an early return to work compared with open surgery (4). In conclusion, the laparoscopic approach is an effective surgical treatment for this pathology, which should be considered in the differential diagnosis of pancreatic cystic tumors, despite the difficulty of diagnosis and rare presentation (5).

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DOI: 10.17235/reed.2020.7003/2020

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