

# Laparoscopic Spleen-Preserving Total Pancreatectomy for a Main-Duct Intraductal Papillary Mucinous Neoplasm

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## ABSTRACT

**Introduction.** Main-duct intraductal papillary mucinous neoplasms of the pancreas (M-IPMN) are potentially malignant cystic neoplasms that can degenerate into invasive malignancy in 43 % of cases.<sup>1</sup> Although laparoscopic pancreaticoduodenectomy and distal pancreatectomy have been previously described for the management of pancreatic neoplasms, laparoscopic total pancreatectomy is rarely described. We present a video demonstrating a laparoscopic spleen-preserving total pancreatectomy in a patient with M-IPMN.

**Case Presentation.** A healthy 66-year-old male was diagnosed with recurrent pancreatitis. A computed tomography of the abdomen demonstrated a diffusely dilated pancreatic duct (10 mm) and a 5 mm mural nodule in the neck of the pancreas. Endoscopic retrograde cholangiopancreatography demonstrated a ‘fish mouth’ appearance at the major papilla, with a villous mass (15 mm) in the pancreatic head. Biopsy was consistent with M-IPMN, and tumor markers were normal.

**Results.** A spleen-preserving laparoscopic total pancreatectomy was performed over a period of 270 min, with 150 cc of blood loss without complications. The patient

was admitted to the intensive care unit for continuous insulin infusion. On postoperative day (POD) 1, his nasogastric tube was discontinued, transitioned to subcutaneous insulin injections, and transferred to the floor. He tolerated a diabetic diet on POD 4. His surgical drain had minimal output with no evidence of a bile leak, and was discontinued on POD 5. The patient’s hospital course was uncomplicated and he was discharged home on POD 7. Pathology demonstrated IPMN with moderate dysplasia.

**Conclusion.** Laparoscopic total pancreatectomy can be safely performed in patients with M-IPMN. This video presentation describes the technique we used for this procedure.

**CONFLICTS OF INTEREST** Brandon C. Chapman, Alessandro Paniccia, Carrie Ryan, Richard D. Schulick, and Barish H. Edil have no conflicts of interest to declare.

**FUNDING** No sources of funding were received for this study.

## REFERENCE

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This work was previously presented at the Society of Surgical Oncology 69th Annual Cancer Symposium, Boston, MA, USA, 2–5 March 2016.

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**Electronic supplementary material** The online version of this article (doi:10.1245/s10434-016-5481-z) contains supplementary material, which is available to authorized users.

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First Received: 23 March 2016;  
Published Online: 2 September 2016

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