

가

,¹ ,²
 . . . 1 . 2

Pancreatic Mucinous Cystadenoma Misdiagnosed as Pancreatic Pseudocyst and Managed by Internal Drainage

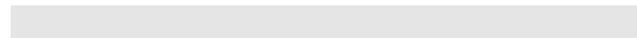
Gyung Mo Son, MD, Tae Yong Jeon, MD, Mun Sup Sim, MD, Chang Hun Lee, MD,¹ and Young Jun Lee, MD.²

Diagnoses of cystic lesions in the pancreas are increasing in clinical practice because of the wider use of imaging studies. The selection of appropriate treatment depends on the ability to distinguish between benign and malignant cysts. However, cystic pancreatic neoplasms sometimes misdiagnosed as pseudocysts, and managed incorrectly. We report herein the case of a pancreatic mucinous cystadenoma, misdiagnosed as a pseudocyst and managed by internal drainage. A 36-year-old woman initially had a cystojejunostomy under the diagnosis of a pseudocyst, but subsequently suffered from epigastric pain and fever due to cyst infection. A distal pancreatectomy, encompassing the previous cystojejunostomy anastomosis site, was performed 2 years after the initial operation and a mucinous cystadenoma was confirmed by histopathologic examination. Although pseudocysts are predominantly cystic lesions in the pancreas, cystic neoplasms should be considered before deciding the treatment strategy because the misdiagnosis a cystic neoplasm as a pseudocyst may result in serious problems. (*J Korean Surg Soc* 2002;63:256-261)

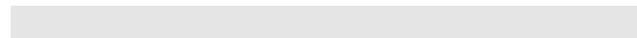
Key Words: Pancreatic pseudocyst, Cystic neoplasms, Mucinous cystadenoma
 : 가 , ,

Department of Surgery, Pusan National University Medical School, Busan, Korea

: , 17가 10
 ☎ 602-739,
 Tel: 051-240-7238, Fax: 051-247-1365
 E-mail: skm171@hanmail.net
 : 2002 6 24 , : 2002 6 29



가 가
 가
 , , 10% .
 , 가
 가 (1,2) 가 ,
 .
 가 , 가 (3)
 가 , 가
 가 , 가
 (3-11) ,
 가
 , (12)
 가
 , 25
 1



36 1
 2000 2 .
 , ,
 , amylase, lipase
 ,
 6×5 cm 가
 .
 2000 3 가
 en-Y cystojejunostomy) .

가
가
23
2002 1 38.5 39°C
가
9,390/mm³, 66.6%
, ESR 107 mm/hr, CRP 4.81 mg/dl 가
amylase 67 IU/L, lipase 42 IU/L, CEA 1.48
ng/ml, CA 19-9 2.31 U/mL

가 8×7×5 cm

(Fig. 1).

2002 3

270 g 가
8.5×8×5.5 cm 가

2).

가 . 0.5×1 cm

35 cm



Fig. 1. Computed tomographic scan showing mucinous cystadenoma with septation and wall thickening, which compresses the splenic vein posteriorly resulting in splenomegaly.

가 15 cm
5 cm
2 cm
, 5 Fr

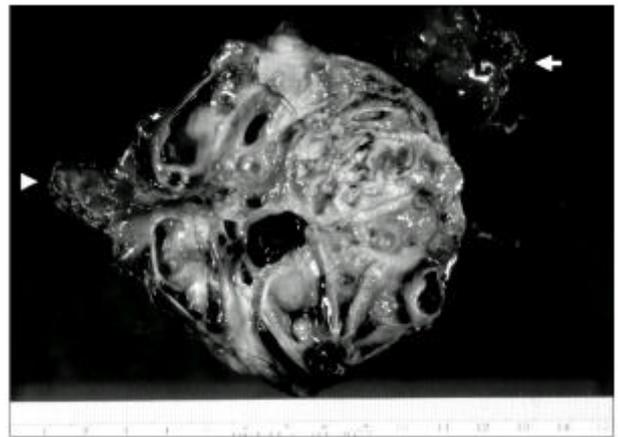


Fig. 2. Gross photograph of the resected specimen, including the pancreatic tail (arrow) and the jejunal loop (arrow head). Cut surface of pancreatic mucinous cystadenoma shows multilocular cysts with smooth, glistening surfaces.

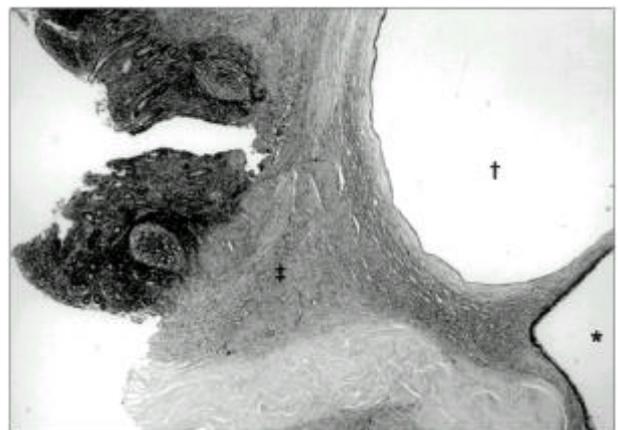


Fig. 3. Microphotograph of pancreatic mucinous cystadenoma. One cystic space (*) is lined by mucin-producing columnar cells, but another cyst (†) exhibits denudation of the lining epithelium. The jejunal wall of cystojejunostomy (‡) shows mild infiltration of chronic inflammatory cells (H&E stain, ×20).

.
 ,
 , 가 (13)
 가 가 (15)
 가 (16) amylase lipase
 가 가 가
 가 가 CEA CA 125, 가
 (13) 가 가 , CA 19-9
 (14) 가 가 (17)
 , 가 가 CA 72-4
 가 가 가 가
 (2, 13) (18, 19)
 가 가 가
 가 가 (20)
 Martin (9) 21 amylase, CEA, CA 19-9
 가 가 7 (33%)
 , Warshaw Rutledge(3) 가
 1/3
 90%가 가
 가 Ahmad (21)
 가 가
 ,가 가
 가 (22)
 ,가 가
 (14) 가 80%
 , 15-47% 가 (23)
 가
 (13) 가
 가 (16,20)
 가 가
 가 가

-
- 22) Kubota K, Noie T, Sano K, Abe H, Bandai Y, Makuuchi M. Impact of intraoperative ultrasonography on surgery for cystic lesions of the pancreas. *World J Surg* 1997;21:72-7.
- 23) Comagno J, Oertel JE. Mucinous cystic neoplasms of the pancreas with overt and latent malignancy (cystadenocarcinoma and cystadenoma). a clinicopathologic study of 41 cases. *Am J Clin Pathol* 1978;69:573-80.
- 24) Lewandrowski K, Lee J, Southern J, Centeno B, Warshaw A. Cyst fluid analysis in the differential diagnosis of pancreatic cysts: a new approach to the preoperative assessment of pancreatic cystic lesions. *AJR* 1995;164:815-9.
-