CIR ESP.2023;101(S3):S313

Cirugía Española

www.elsevier.es/cirugia

O-029 - PANCREATIC NEUROENDOCRINE TUMORS - ANALYSIS OF RECURRENCE AFTER SURGICAL RESECTION

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Resumen

Introduction: Pancreatic neuroendocrine tumors (PNETs) are rare, accounting less than 5% of all pancreatic neoplasms. They encompass a heterogeneous spectrum of tumors with varying natural history, clinical presentation, and prognosis. The 5-year survival ranges from 25% up to 100% in some studies.

Objectives: Assess the rate, sites and predictors of recurrence and its effect on overall survival.

Methods: Retrospective review of 88 patients who underwent surgical resection of PNETs in a tertiary hospital center between 2008 and 2021.

Results: 45.5% were male and 54.5% female, with mean age of 55 years (13-80 years). There were 14 (15.9%) recurrences with median time to recurrence of 17 months (3-107 months) with a median follow-up of 56 months (range 7-169 months). The most common site of recurrence was the liver. The most common treatment of recurrences was chemotherapy. The median overall survival was 74.5 months. Overall survival for those with and without recurrence was 97.7% and 100%, with only 2 deaths after recurrence. The predictors of recurrence on univariate analysis were complications, tumor size, ki67, mitotic count, necrosis and venous invasion.

Conclusions: Complications, tumor size, ki67, mitotic count, necrosis and venous invasion are significant predictors of recurrence after the resection of pancreatic neuroendocrine tumors with hepatic metastases being the most common. Survival of patients with recurrence is not significantly different from patients without recurrence.