

Frequency and Characterization of Benign Lesions in Pancreatic Specimens of Patients Operated for the Suspicion of Pancreatic Cancer

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Context A final diagnosis of benign lesions is reported in up to 21% of patients who underwent duodeno-pancreatectomy for neoplasia, whereas no data have yet been published for resection of the body-tail.

Objective To investigate the frequency and to characterize the benign lesions mimicking a neoplasia in the head and in the body-tail of the pancreas.

Methods We retrospectively reviewed all the pancreatic specimens collected from 2005 to 2011 in the database of the Institute of Pathology of Mainz. Patients with a final diagnosis excluding malignancy were analyzed by histological, clinical and imaging findings. **Results** Three-hundreds and 73 patients were identified. A final diagnosis of benign disease was observed in 33 patients (8.8%), in 25 out of 298 (8.4%) in the resections of the pancreatic head and in 8 out of 75 (10.7%) of the body-tail. Among them we found

paraduodenal pancreatitis (PP) in 13 cases (39.4%), autoimmune pancreatitis (AIP) in 11 (33.3%), chronic pancreatitis (CP) in 6 (18.2%) and accessory spleen in 3 (9.1%). In the head of the pancreas the most frequent diagnosis is PP and AIP, whereas in the body-tail accessory spleen and CP. Patients with benign lesions were more likely to be males, younger, smokers and drinkers, with longer lasting pain. Lower serum levels of CA 19-9 and lower frequency of jaundice were more frequently observed in this group. Pancreatic calcifications were more frequently associated with benign lesions whereas a larger dilation of common bile duct in the malignant lesions. AIP and PP have different clinical and radiological profiles. **Conclusion** Benign lesions are observed with the same frequency in specimens of the head or body-tail of the pancreas, while the type of final diagnosis is different.