



GRUBER-FRANTZ TUMOR: A BLUE MOON FINDING IN THE PANCREATIC NEOPLASMS

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ABSTRACT This case report aims to review a breadth of literature to gain a deeper insight into this rare pancreatic tumor and shine some light on the possible differential diagnoses. We discuss the case of a 46 year old lady with abdominal computed tomography (CT) suggestive of a pancreatic neoplasm. The patient underwent open distal pancreatectomy with splenectomy and complete tumor excision (R0). The gross dimensions of the tumor were 12cm*10cm*10cm. The patient was discharged eight days after surgery on a soft diet. Histopathological examination of the specimen revealed SPT with IHC markers positive for CD10, progesterone receptor (PR) and synaptophysin.

KEYWORDS : Pancreatic tumour, Gruber-Frantz tumour, Solid Pseudopapillary tumour

Introduction

Gruber-Frantz tumor or colloquially known as Solid Pseudopapillary Tumour (SPT) of the pancreas, is a rare exocrine pancreatic neoplasm primarily of the females of childbearing age group. Oncologically the tumor has low malignant potential making complete surgical excision the gold standard in its management.

Though the management of SPT is relatively well-defined coming to a definite diagnosis can be pretty perplexing. Clinical examination, high degree of suspicion to other differentials, close reliability on the imaging modalities, and the histopathology can aid in the diagnosis of the same.

Benign conditions like calcified hemorrhagic pancreatic pseudocyst, hydatid cyst, cystadenoma and malignant conditions like cystadenocarcinoma, intraductal papillary mucinous neoplasm (IPMN) and others may bear semblance to SPT.

2. Bailey and Love's Short Practice of Surgery 28th Edition

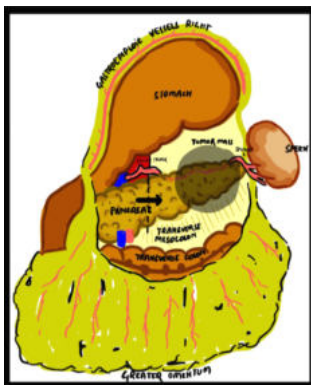
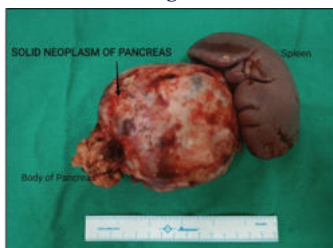


Figure 1: Diagrammatic representation of the tumour and its relationship with the surrounding structures



Summary

SPT is an uncommon finding in the pancreatic neoplasm which can mimic other benign and malignant conditions. This case report gives a brief review on this tumor while providing supporting literature to come to its correct diagnosis and subsequently its management.

REFERENCES

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