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The Place of the Organ Preserving Procedures in Treatment of Small Pancreatic Neuroendocrine Tumors. Is it Feasible or Not?

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Background: Pancreatic Neuroendocrine Tumor (NET) is tumor with the different malignant potential which can be finally diagnosed on morphological specimen examination. There is no universal treatment position for small benign pancreatic NETs (pNETs). Organ preserving procedures (OP) such as tumor enucleation and middle pancreatectomy can become an option in difficult cases and give a maximal benefit with minimizing of postoperative complications.

Aim: To improve results of treatment patients with pancreatic neuroendocrine tumors.

Material and Methods: There were 137 patients with pancreatic NETs surgically treated for the period of 2007 – 2017 years in abdominal department №1 of A.V. Vishnevsky Institute of Surgery, Moscow, Russia. Most of them were female – 96 cases.

Results: Most of the patients both in organ preserving (OP) and standard procedures (SP) groups were females with comparable median age 48 (38;54) and 51 (41;62). Morphological specimen examination revealed that in the mean tumors diameter was significantly less in OP - 19 vs. 25 mm SP group, the similar difference in groups were in Ki67 Index and mitotic rate. There was significantly less estimated blood loss volume in OP group. Postoperative LOS and drainage placement time were although less in OP group but without significant difference.

Conclusion: The organ preserving procedures can become an option to treatment of small benign pNETs. It has better preoperative results with minimal parenchyma removal. Unfortunately there are no enough investigations in survival after OP comparing with standard procedures and wait-and-see position.