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## Metastatic tumors to the pancreas: is surgery a therapeutic option for this rare clinical entity?

**Lucia Moletta**

University of Padova, Italy

**Statement of the Problem:** Pancreatic metastases (PM) from other tumors are rare and they account for approximately 1-2 % of all pancreatic malignancies. PM represent a therapeutic challenge: most patients present at diagnosis with a widespread disease while the finding of an isolated pancreatic lesion is far more uncommon. Even if in recent years a growing number of studies have reported successful pancreatic resection for PM, the role of surgery in this context remains undefined. The purpose of this study is to investigate the safety and efficacy of surgical resection in patients affected by PM.

**Methodology & Theoretical Orientation:** We reviewed all patients with PM between January 1980 and December 2020 from a prospectively collected database. All enrolled patients had a histological diagnosis of PM. The following data were analyzed: basic demographics, characteristics of primary tumor, time interval between primary and secondary PM, symptoms, presence of extra pancreatic disease, surgical strategy, morbidity, mortality, length of ICU and hospital stay, neoadjuvant and adjuvant treatment, follow-up, disease-free survival and overall survival.

**Findings:** In the considered time-interval, 44 patients were observed in our Center for PM (M/F 22/22; median age 66 years, range 41-78). Renal cell carcinoma represented the most frequent primary tumor (n=19), followed by colorectal cancer (n=12), sarcoma (n=4), melanoma (n=4), lung cancer (n=2), schwannoma (n=1), gastric cancer (n=1), small bowel carcinoid tumor (n=1). Thirty-seven patients underwent surgery and pancreatic resection was feasible in 35 cases. Overall morbidity and mortality rates were 36% and 2%, respectively. Median OS and DSF survival were significantly longer for patients with PM from renal cancer when compared to other patients (p=0.008). At univariate and multivariate analysis, the renal origin of PM was the only independent prognostic factors for survival.

**Conclusions:** Surgery for PM is safe and effective, especially for PM of renal origin.

## Biography

Lucia Moletta graduated in 2008 at University of Padova and got her surgical residency in 2015 at the same University. Since 2017, she had been working as research associate at the Department of Surgical, Oncological and Gastroenterological Sciences (DISCOG), Clinica Chirurgica 3, University and Hospital of Padua. She attended in 2015 as a visiting physician the Hepatobiliary and Pancreatic Surgical Unit at the Academisch Medisch Centrum (Amsterdam). Her main interest lies in the oncologic diseases of the pancreas, as far as both the diagnosis and surgical treatment are concerned and in the oncologic diseases of the esophagus and stomach. She carries out research into new treatment methods for pancreatic cancer, minimally invasive pancreatic surgery, and new diagnostic and therapeutic approaches for pancreatic cysts, pancreatic carcinoma, esophageal and gastric tumors.