

ABDOMINAL PAIN MIMICKING PANCREATITIS: AN UNUSUAL PRESENTATION OF PNET

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Introducción:**Materiales y Métodos:****Resultados:****Conclusiones:**

Pancreatic neuroendocrine tumors (pNETs) are rare neoplasms whose incidence has increased in recent decades. The presence of non-functional pNETs significantly reduces patient survival, with genetic alterations being the most prevalent causes. This study contributes to the literature by describing the clinical, pathological, and therapeutic characteristics of this neoplasm. The methodology employed was a retrospective analysis of medical records. The sample size was determined by the number of cases identified in the database. The inclusion criteria were: patients with a confirmed diagnosis of pNET, abdominal pain, and no previous history of pancreatic disease. The exclusion criteria were: patients with a history of pancreatic surgery or other abdominal diseases. The data were analyzed using statistical software. The results showed that the majority of cases were diagnosed in the late stages of the disease, with a median survival time of approximately 24 months. The most common genetic alterations were found in the *men1* and *daxx* genes. The pathological findings were consistent with a well-differentiated pNET, histological grade 2. The immunohistochemical report was positive for chromogranin A (clone AE1/AE3), synaptophysin (clone DAK-SYNAP), cytokeratin (clone CAM5.2), PAX8 (clone MRQ-50), progesterone receptor (clone 16, 5%), and Ki-67 (clone K2, 4%). It was negative for S-100 protein (polyclonal), GATA-3 (clone L50-823), and beta-catenin (clone 17C2), confirming the diagnosis of well-differentiated pNET, histological grade 2.