

Surgical Treatment Tumors and Cysts of the Pancreas in Children

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Abstract : Introduction: cystic and solid pancreatic tumors have a relevant and disruptive position in many positions. The results of the treatment of children with tumors and pancreatic cysts aged 3 to 17 years for the period from 2008 to 2019 on the basis of the Morozov State Children's Clinical Hospital in Moscow were analyzed. The total number of children with solid tumors was 17, and 31 with cysts. In all children, the diagnosis was made on the basis of ultrasound, followed by CT and MRI. In most patients with solid tumors, they were located in the area of the pancreas tail - 58%, in the body area - 14%, in the area of the pancreatic head - 28%. In patients with pancreatic cysts, the distribution of patients by topography was as follows: head of the pancreas - 10%, body of the pancreas - 16%, tail of the pancreas - 68%, total cystic transformation of the Wirsung duct - 6%. In pancreatic cysts, the method of surgical treatment was based on the results of MRCP, the level of amylase in the contents of the cyst, and the localization of the cyst. Thus, pathogenetically substantiated treatment included: excision of cysts, internal drainage on an isolated loop according to Ru, the formation of pancreatojejunostomy in a child with the total cystic transformation of the Wirsung duct. In patients with solid pancreatic lesions, pancreatoduodenal resection, central resection of the pancreas, and distal resection from laparotomy and laparoscopic access were performed. In the postoperative period, in order to prevent pancreatitis, all children underwent antisecretory therapy, parenteral nutrition, and drainage of the omental bursa. Results: hospital stay ranged from 7 to 12 days. The duration of postoperative fermentemia in patients with solid formations lasted from 3 to 6 days. In all cases, according to the histological examination, a pseudopapillary tumor of the pancreas was revealed. In the group of children with pancreatic cysts, fermentemia was observed from 2 to 4 days, recurrence of cysts in the long term was detected in 3 children (10%). Conclusions: the treatment of cystic and solid pancreatic neoplasms is a difficult task in connection with the anatomical and functional features of the organ.

Keywords : pancreas, tumors, cysts, resection, laparoscopy, children

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