Role of EUS in management of pancreatic tumors: review of 70 patients

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ABSTRACT

Background: Endoscopic ultrasound (EUS) has gradually become the main stream method of the diagnosis and local treatment of pancreatic tumors. Endoscopic ultrasound (EUS) is frequently used in making the cytological diagnosis of pancreatic cancer and its great role in the pre-operative staging of pancreatic tumors

Objective: To evaluate the role of EUS in diagnosis and treatment of pancreatic tumors prospectively for 2 years study 2014-2015.

Patients and methods: Prospective study including 70 patients who presented with pancreatic tumors underwent EUS at the endoscopy unit at Faculty of Medicine Cairo University and National Cancer Institute, Cairo University.

Results: Out of 70 patients; median age was 55 years (range 32_73 years). Males were 32 (46%) and females were 38 (54%). Jaundice was the main symptom 47 (67%), clay colored stool 46 (65.7%), dark urine 47 (67%) and abdominal pain 50 (71%). There were 20 patients with benign disease and 50 patients with malignant disease. The following results showing the accuracy of the EUS in detecting malignant pancreatic tumors; Sensitivity: 96.0%, specificity: 75%, PPV: 90.6%, NPV: 88.2%, accuracy: 90.0%.

Conclusion: EUS is an accurate preoperative tool in the assessment of nodal staging, vascular invasion and resectability in patients with pancreatic adenocarcinoma. EUS guided interventions can be used to treat various conditions; with favorable outcomes in most cases. EUS can clarify locoregional spread when CT/MR is equivocal. The combination of superior detection, good staging, tissue diagnosis and potential therapy makes EUS guided FNA a cost-effective modality. A multidisciplinary approach to PDAC is essential to optimize treatment options and selection of patients for surgery.

Key Words: Local treatment, Endoscopic ultrasound (EUS), Pancreatic tumors

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