

SYMPTOMATIC MINOR PAPILLA ADENOMA IN ASSOCIATION WITH PANCREAS DIVISUM

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We report the first case of a symptomatic minor papilla adenoma in a patient with pancreas divisum. The patient is a 23 year old male with multiple episodes of abdominal pain. Radiographic and laboratory studies confirmed the diagnosis of pancreatitis. CT scan of abdomen was also suggestive of a 30mm post bulbar duodenal mass. A 35mm sessile mass located at the minor ampulla was seen on endoscopy. Endoscopic biopsies were consistent with villous adenoma. MRCP illustrated the anatomic variant diagnostic of pancreas divisum. A transduodenal minor ampullectomy was performed to (1) eliminate the chance of malignant degeneration of the adenoma and (2) relieve the ductal obstruction caused by the mass. A minor duct sphincteroplasty was also performed to prevent recurrent pancreatitis and stenosis secondary to later scarring. The patient's post operative course was uneventful. At 1 year post-op a single 5mm adenomatous polyp distal to the resection site was endoscopically removed. The patient has been without symptoms and remains under close endoscopic surveillance.