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[Pancreatic Cancer](#)

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Clinical Profile of Patients With Periapillary Carcinoma

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Background: Periapillary carcinoma is a malignancy involving the head of pancreas, duodenum, and distal bile ducts. Our goal was to analyze the clinical characteristics of patients diagnosed with periapillary carcinoma to gain a better understanding of the natural history of the disease, and also to allow comparison of our data with data from Western patient populations.

Methods: This was a retrospective record-based descriptive study. Epidemiologic data for all patients diagnosed with periapillary carcinoma in Kasturba Hospital in the past 3 years (n=92) were collected. From this analysis, 24 patients who were managed exclusively by the Department of GI Surgery were identified, and their records analyzed for detailed clinical profiling.

Results: Among 24 patients included in the analysis, the majority were in the 50-60-year age group (28.3%), followed closely by the 60-70-year age group (27.2%). The study population included 58.7% males and 41.3% females. While all of the patients (100%) had jaundice as a presenting complaint, other accompanying complaints in descending order of frequency were pruritus (66.7%), abdominal pain (54.2%), weight loss (54.2%), and vomiting (29%). Besides jaundice, pruritus was the major presenting complaint in female patients (81.8%), and both weight loss (53.8%) and pruritus (53.8%) were major complaints in male patients. The main treatment modalities were stenting (41.7% of patients) or surgery (66.7%); 8.4% of patients underwent both stenting and surgery. The median post-treatment asymptomatic period was 9.5 months for both stenting as well as surgery.

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Conclusions: The median asymptomatic period post-therapy was similar in patients who underwent surgery or stenting. No conclusions can be drawn regarding which is the best treatment; the most important factor in choosing therapy is the disease stage at time of presentation. However, because our data show that pruritus and jaundice are the chief complaints of patients presenting with periampullary carcinoma, it is advisable to offer obstruction-relieving procedures, such as stenting or papillotomy, to relieve the cholestatic symptoms as a palliative measure to improve patient quality of life.