## A Case of Epidermoid Cyst in the Intrapancreatic Accessory Spleen Masquerading Pancreas Mucinous Cystic Neoplasm

Hee Su Park, Young Deok Cho, Sang Woo Cha, So Young Jin, Hwa Jin Cha

- Department of Internal Medicine, Soon Chun Hyang University College of Medicine, Seoul, Korea
- Department of Pathology, Soon Chun Hyang University College of Medicine, Seoul, Korea
- Department of Radiology, Soon Chun Hyang University College of Medicine, Seoul, Korea

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 The incidence of Pancreatic neuroendocrine tumors is <1 in 100,000 in Asian and European population. And epidermoid cyst in the intrapancreatic accessory spleen is extremely rare condition which could be mistaken for pancreatic neuroendocrine tumor and do not cause clinical symptoms. We report one case of epidermoid cysts of intrapancreatic accessory spleen which mimicking pancreatic neuroendocrine tumor.

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• The patient, aged 58 was referred to our department for pancreatic cystic lesion. She was asymptomatic, and the mass with cystic component was detected in the pancreatic tail in a computed tomography scan. Under a suspicion of pancreatic cystic neuroendocrine tumor, she underwent a distal pancreatectomy. Pathologic feature of resected specimens were shown to relatively well-defined ovoid hemorrhagic cyst without remarkable solid area which suggested that epidermoid cysts in the accessory spleen. We suggest the possibility of epidermoid cyst in the intrapancreatic accessory spleen in the differential diagnosis of pancreatic cystic lesion.

## Keywords

• Epidermoid cyst, Intrapancreatic spleen, Neuroendocrine tumor



Fig. 1. Contrast-enhanced abdominal computed tomography images (A: Axial, B: coronal) show 1.5cm sized cystic mass with peripheral enhancing portion in pancreas tail.

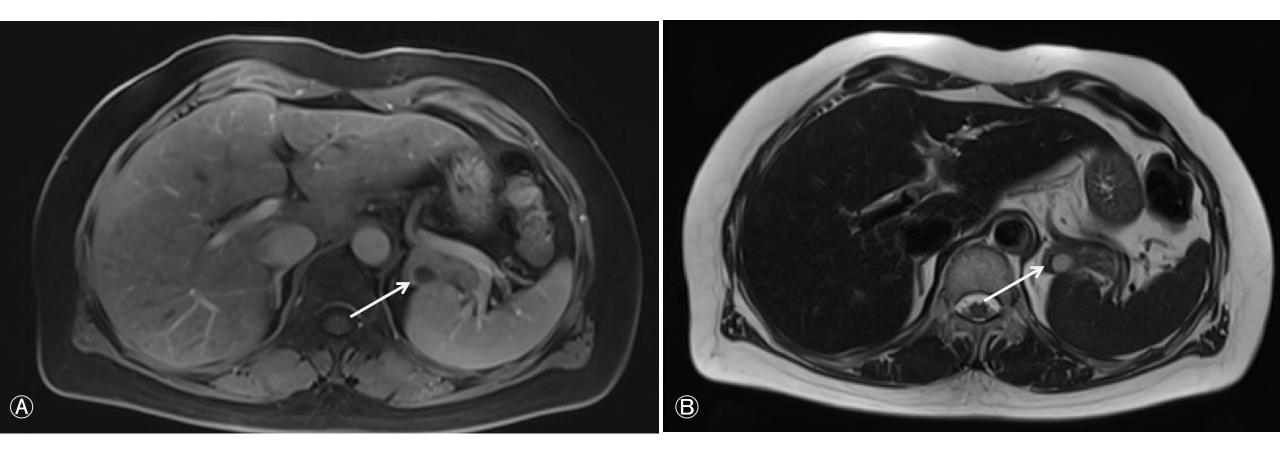


Fig. 2. (A) Contrast-enhanced, fat-saturated T1-weighted image demonstrates a cystic lesion with peripheral enhancing component in pancreas tail (white arrow). (B) Enhancing portion of the mass shows hypointense on T2-weighted image (white arrow).

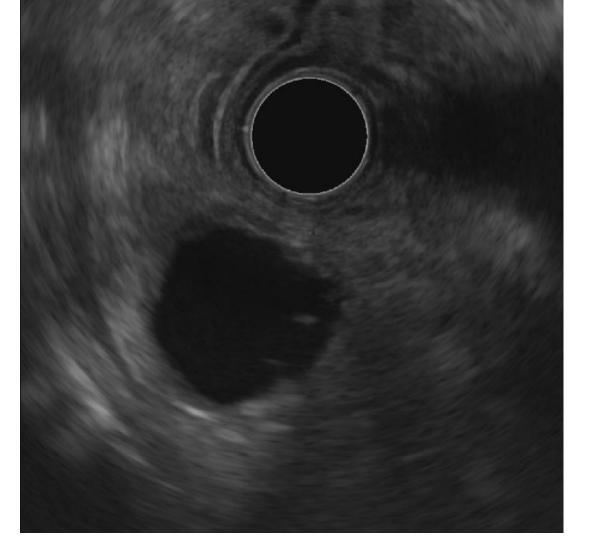


Fig. 3. Endoscopic ultrasonography shows a unilocular cystic lesion on the pancreatic tail and hyperechoic materials inside cystic lesion.

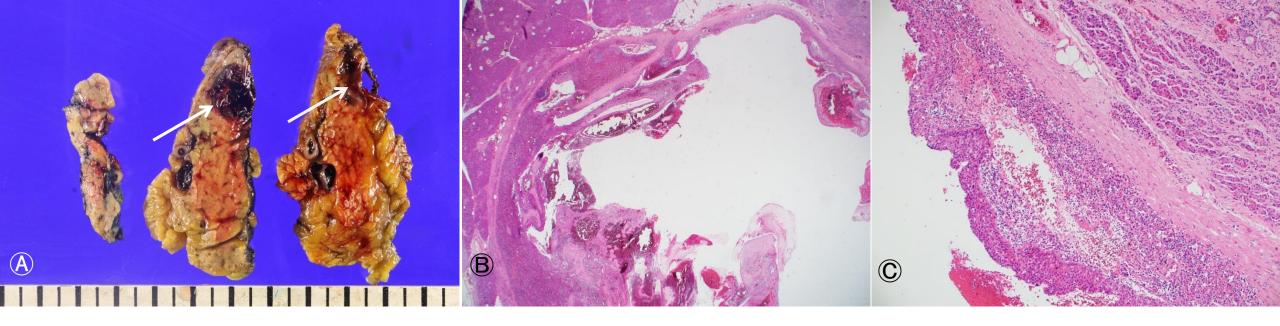


Fig. 4. (A) Serial sections of the pancreas shows an well demarcated hemorrhagic cyst, measuring 1.5 cm in dimension (white arrow). (B) Microscopically, a cystic mass is noted in the intrapancreatic accessory spleen (H-E, ×12.5). (C) The cyst is lined by stratified squamoid cells (H-E, ×100).

No	Age/Gend er	Sit e	Symptom	Size(cm)	СТ	MRI	EUS	FNA	Preop diagnosis
1	54/F	Tail	Epigastric pain	15.0 X 11.0	Ye s	Yes	No	No	Mucinous cystic neoplasm
2	32/M	Tail	Abdominal pain	7.5 X 6.5	Ye s	No	No	No	Mucinous cystic neoplasm
3	49/F	Tail	Asymptomati c	2.0 X 1.0 X 1.0	Ye s	No	No	No	Mucinous cystic neoplasm
4	37/M	Tail	Asymptomati c	6.0 X 5.0 X 2.5	Ye s	No	Yes	No	Mucinous cystic neoplasm
5	54/M	Tail	Abdominal pain	2.0 X 1.5	Ye s	No	No	No	Mucinous cystic neoplasm
6	47/M	Tail	Asymptomati c	2.3 X 1.8 X 1.7	Ye s	Yes	No	No	Neuroendocrine tumor
7	53/M	Tail	Abdominal pain	2.5 X 2.0 X 2.0	Ye s	Yes	No	No	Neuroendocrine tumor
8	51/F	Tail	Asymptomati c	2.3 X 1.9	Ye s	No	Yes	Yes	Mucinous cystic neoplasm
9	56/F	Tail	Asymptomati c	1.5 X 1.5	Ye s	Yes	Yes	No	Neuroendocrine tumor

EUS, endoscopic ultrasonography; FNA, fine needle aspiration.

Table 1. Summary of the 9 cases of epidermoid cyst in intrapancreatic spleen, including the present case in Korean.