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The Treatment of Pancreatic Neuroendocrine Tumors – A Retrospective Single-Centre Study

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Abstract
Introduction: Pancreatic neuroendocrine tumors (PNETs) are uncommon cancers, but their overall incidence seems to be on the rise, possibly due to better detection with advancements in cross-sectional imaging techniques.
Methods: This study consists of a retrospective analysis of PNET patients treated in the First Surgical Oncology Clinic over a period of 10 years. The patient files were evaluated, and the following parameters were taken into consideration: gender, age, primary tumor site, extension of the disease, metastatic sites, the therapeutic approach, type of surgery, histopathological results, postoperative mortality, and morbidity.
Results: Over the course of 10 years, there were 16 patients diagnosed with PNETs. Surgical interventions consisted in: pylorus-preserving pancreaticoduodenectomy in 5 cases, distal pancreatectomy in 3 cases, enucleation of the tumor in 4 cases, liver biopsy in 3 patients and one case in which choledochoduodenostomy and a liver biopsy were the treatment option. Mean length of stay was 10.6 days. In the study group, there were 4 cases that presented grade I-II complications (Clavien-Dindo). There was no case of postoperative or 30 days mortality.
Conclusion: This study outlines the surgical management and clinicopathological findings of PNETs. Surgical therapy must be tailored to tumor and clinical characteristics.
Key words: pancreatic neuroendocrine tumor, chemotherapy, targeted therapy, surgical treatment