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Summary

PANCREATIC CANCER SCREENING IN HIGH-RISK PATIENTS: CAN WE DETECT RELEVANT FINDINGS?

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Pancreas

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A single-center observational study of 35 high-risk patients undergoing pancreatic cancer screening with MRI and EUS detected neoplastic or preneoplastic lesions in 14.3% and other pancreatic abnormalities in 51.4% of cases.

KEY POINTS

- Among 35 high-risk patients (median follow-up 23 months), solid tumors were detected in three patients (8.6%): two pancreatic ductal adenocarcinomas and one neuroendocrine tumor, with two individuals (5.7%) showing branch-duct intraductal papillary mucinous neoplasms.
- Other pancreatic abnormalities were detected in 18 patients (51.4%), including chronic pancreatitis-like parenchymal changes (34.3%), peripancreatic lymph nodes (5.7%), and fatty pancreas (5.7%), while 12 patients (34.3%) had normal findings.
- The most frequent hereditary syndrome was hereditary breast and ovarian cancer syndrome (54.3%), with BRCA2 mutation being the most common identifiable genetic factor (34.8%).
- MRI and EUS showed discordance in 10 patients (28.6%), with EUS detecting more parenchymal changes (n=5), pancreatic steatosis (n=2), and one neuroendocrine tumor not described on MRI.
- This material would be most relevant to gastroenterologists and oncologists managing surveillance programs for individuals at high genetic or familial risk of pancreatic cancer.

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