

Pancreatic squamous cell carcinoma effectively treated with resection and systemic therapy

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Abstract

Introduction:

Squamous cell carcinoma of the pancreas is a rare type of pancreatic malignancy. It is classified as non-endocrine neoplastic process mostly arising from ductal cell. Although in the current literature SCCP is described as highly aggressive cancer, poorly responsive to treatment, with bad prognosis and survival rates, we describe a case report of a successful outcome.

Case description:

A 69-year-old man was admitted to the hospital with the suspected pancreatic lesion incidentally discovered on ultrasound, confirmed in CT scan. The patient was in a good general condition and did not have any complaints. He underwent pancreaticoduodenectomy with the removal of portal vein infiltration. Intraoperative histopathological examination revealed squamous cell carcinoma infiltration. However the final histopathological result turned out to be an adenocarcinoma. The patient received adjuvant chemotherapy. One year later a suspected lesion was detected during PET/CT. The patient underwent laparotomy with the resection of retroperitoneal space tumor, followed by adjuvant FOLFIRI chemotherapy. Histopathological examination revealed squamous cell carcinoma and after re-checking of the previous specimen, the diagnosis of SCC was established.

Discussion:

SCCP occurs in only 0.5% to 5% of all pancreatic neoplasms. Despite the fact that it is aggressive and invasive cancer, usually locally advanced and metastatic at the time of diagnosis and poorly responsive to treatment with a short life expectancy, our patient has been living for over 3 years. Surgical resection is of a crucial value and combined with targeted systemic therapy may contribute to a significant extension of the patient's life.