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Neuro-endocrine tumors: A case report and a review

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Neuro-endocrine (NE) tumors (NETs) of the gastro entero-pancreatic system have slow growth and indolent evolution; usually at diagnosis they already present metastasis. It is difficult to quantify the real incidence of NETs whereas there is a difference in the cancer registries; however the estimate is 1 to 7 per 100,000 populations per year, representing 0.49% of all cancers. NETs are characterized by the secretion of active peptides, like somatostatin, which may cause physiologic effects, such as carcinoid syndrome. The most common primary sites are small bowel, large bowel and pancreas, but with less frequency other parts of the body are affected. At diagnosis, 65-90% of patients already have synchronic neuro-endocrine liver metastases (NELM). Those with metastasis have a 5-year survival 13-54% vs. 75-99% from those who doesn't have it. The treatment is controversy, but the resection surgery of the primary tumor and the liver metastasis is the only potential treatment for cure. However, in case of unresectability of hepatic metastases, the therapeutic approach will be chosen among radio frequency ablation, ases ablation, trans-arterial embolization or liver transplantation. Therefore the objective of the present study is to discuss a case report of a NELM including its surgery treatment, showing a comparison with other results.

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