

## **Pancreaticoduodenectomy for a tumor of the duodenal papilla in a patient with situs inversus totalis: A case report**

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**S**itus inversus totalis is a rare condition characterized by abnormality on rotation of abdominal and thoracic cavity organs, with complete reversal of the position in 0,005% of all live births. The genes implicated in left-right asymmetry, among which are lefty, nodal, iv, HAND, ZJC3, Shh, and ACVR2B Pitx2. This condition associated with cancers of the pancreas or duodenal papilla is rare.

Pancreaticoduodenectomy with or without resection of the pylorus is the procedure of choice; periampullares its role in tumors is well established based on the results of improved survival compared with palliative procedures. In addition to this, the low rates of morbidity and operative mortality of gastroduodenopancreatectomy centers with experience in this type of procedure.

Case report: Female, 49 years old, brown, married, with 3 months intermittent low-grade fever, night, associated with jaundice, acholic, hyporexia, asthenia, epigastric pain, bilious vomiting and weight loss of about 16 pounds in the period. Computed tomography and magnetic resonance showed situs inversus totalis with dilatation of intrahepatic bile ducts and liver to extra distal common bile duct, measured 20mm, image expansive rounded on duodenal papilla; without further changes.

The patient underwent cholecystectomy and pancreaticoduodenectomy with pylorus preservation without intercurrents.

The microscopic show a duodenal papilla with moderately differentiated adenocarcinoma, angiolymphatic embolization and free surgical margins; duodenal submucous nodules; pancreas of habitual patterns and discrete area of inflammatory infiltration, chronic cholecystitis.

Conclusion: Although uncommon, these patients pancreaticoduodenectomy for resectable lesions is safe, when one takes into consideration the anatomic changes in this case.

### **Biography**

Fernando Leal Pereira is a GI Surgeon, graduated in Medicine from Marília School of Medicine (1997) and Masters in Surgery at the Santa Casa of São Paulo School of Medicine (2007). He is currently an assistant professor at the Presidente Prudente School of Medicine, coordinator of residence in General Surgery at Regional Hospital, coordinator of the Local Cancer Hospital Registry, ATLS instructor and coordinator of the College League of Trauma. He has experience in general surgery, with emphasis on digestive tract surgery, acting on the following topics: neoplasms of the pancreas and biliary tract, trauma surgery and bariatric surgery.

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