Duodenal Duplication Cyst in Adulthood: Case Report and Brief Review of Literature

Quisto de Duplicação Duodenal no Adulto: Caso Clínico e Breve Revisão da Literatura

Keywords: Adult; Cysts; Duodenal Diseases; Duodenum/anomalities
Palavras-chave: Adulto; Doenças Duodenais; Duodeno/anomalias congênitas; Quistos

Dear Editor,

Duodenal duplication cysts (DDC) account for 2% - 12% of all intestinal duplications. Its incidence is below 1 in 100 000 live births. They are typically cystic, non-communicating, and located at the medial border of the second part of the duodenum.1

Diagnosis is usually made in childhood, but up to one-third of cases may be found in the adult population, because the clinical presentation is variable.2

Common symptoms include upper abdominal pain, nausea, and vomiting, but the first episode of DDC can be a complication rather than the typical symptoms.3 Complications such as acute pancreatitis, obstructive jaundice, luminal obstruction, gastrointestinal bleeding and infection have been reported.1,3 Therefore, due to the heterogeneous clinical presentation, the diagnosis may be challenging, and imaging and endoscopy play crucial roles in identifying DDC.4

We report the case of a 45-year-old male patient with recurrent abdominal pain and cholestasis [aspartate transaminase 425 U/L (normal < 35 U/L); alanine transaminase 221 U/L (normal < 45 U/L); total bilirubin 3.2 mg/dL (normal 0.2 – 1.2 mg/dL)]. A duodenal lesion was detected using an abdominal computerized tomography scan. Further investigations including upper gastrointestinal endoscopy, endoscopic ultrasound, and magnetic resonance cholangiopancreatography confirmed a 50 mm oval and subepi-
PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients’ data publication.

REFERENCES


PATIENT CONSENT

Obtained.

COMPETING INTERESTS

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