A case of pancreatic tuberculosis mimicking pancreatic tumour and diagnosed by Endoscopic Ultrasound-guided Fine Needle Aspiration (EUS FNA)

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Clinical presentation

- A previously fit and well Asian man in his 60s presented with a short history of upper abdominal pain and jaundice and was found to have a mass in the head of the pancreas and biliary obstruction.
- Malignancy (lymphoma or carcinoma) seemed to be the most likely diagnosis.
- Transabdominal biopsy proved impossible.
- EUS FNA was the only option for definitive diagnosis.

Discussion:

- EUS FNA proved to be a very good diagnostic tool in the diagnosis of this solid pancreatic lesion1.
- Definitive diagnosis was important as the treatment and prognosis of intraabdominal infection and malignancy are completely different.
- The incidence of abdominal tuberculosis is reported as 12% of patients with active TB infection of which 3.5% is hepatobiliary and 6-38% is intra-abdominal2.
- Pancreatic tuberculosis is extremely rare and mimics malignancy3.

Cytological Findings

Summary & Conclusion:

This case demonstrates the value of EUS FNA as a diagnostic tool for definitive diagnosis in pancreatic lesions that are notoriously difficult to diagnose reliably as inflammatory or malignant4.