IMAGE OF THE ISSUE

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Transverse Colon Varices as a Diagnostic Hint for Pancreatic Cancer

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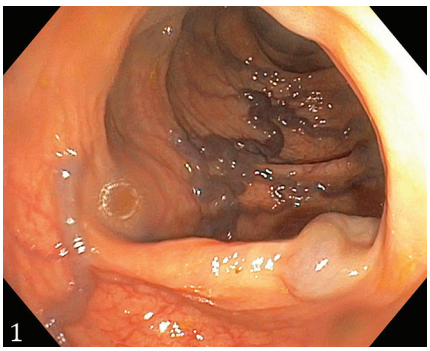

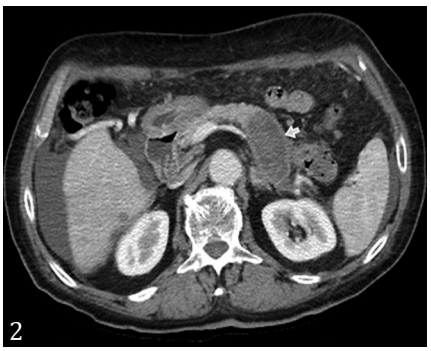

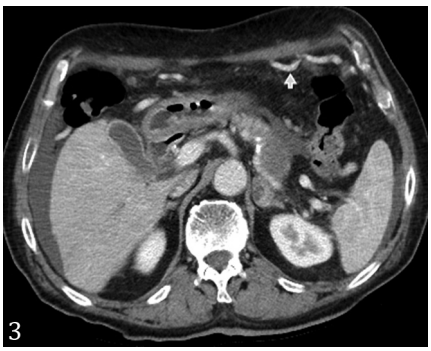

A 68-year-old male patient presented incomplete bowel movement, chronic constipation and significantly weight loss unintentionally (~70 kg in 6 months). His vitals were normal, and his physical exam was unremarkable. The patient was a former smoker (40 pack-years) and was known with type II diabetes. Laboratory tests showed mild inflammatory syndrome (CRP=8.43 mg/dl), hyperglycemia and a CA19-9 of 21,562 U/ml. Upper gastrointestinal endoscopy showed no abnormalities, but during colonoscopy, a tortuous varicose cord was found in the left half of the transverse colon on a 10-12 cm length (Fig.1). Contrast-enhanced thoracic and abdominal computed tomography revealed a lesion that occupied the body and the tail of the pancreas (Fig. 2, arrow) and invaded the left adrenal gland and the splenic vein with development of collateral veins adjacent to the colon (Fig. 3, arrow). Multiple abdominal and pulmonary adenopathies and several secondary hepatic lesions could also be observed.

Endoscopic ultrasound fine needle aspiration was performed; the histological assessment confirmed the diagnosis of ductal pancreatic adenocarcinoma. The patient was referred to the oncology department where he received palliative care, given the advanced stage of his disease.

Colonic varices are a rare entity mostly associated with portal hypertension in cirrhotic patients [1]. However, in a small number of patients they can appear due to left portal hypertension secondary to and pancreatic diseases like cancer [2, 3]. In most cases this leads to gastric varices and splenomegaly, but there are rare situations where patients present several anatomic variations, and they develop colonic varices instead [4].

In our case, the colonic varices were an incidental finding, but sometimes lower gastrointestinal hemorrhage can be the first clinical manifestation. Currently there is no consensus regarding the best management of colonic varices bleeding, but several therapeutic options have been described such as band ligation and embolization [1,5].

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Conflicts of interest: None to declare.

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