

Insulinomas : about 9 cases

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Introduction:

Insulinomas are rare, their incidence is estimated at 4/million/an [1]. They are the most common tumors of the endocrine pancreas [2]. They are frequently small lesions, malignant in 10% of cases [3]. We report a series of 9 cases of insulinoma.

Objective:

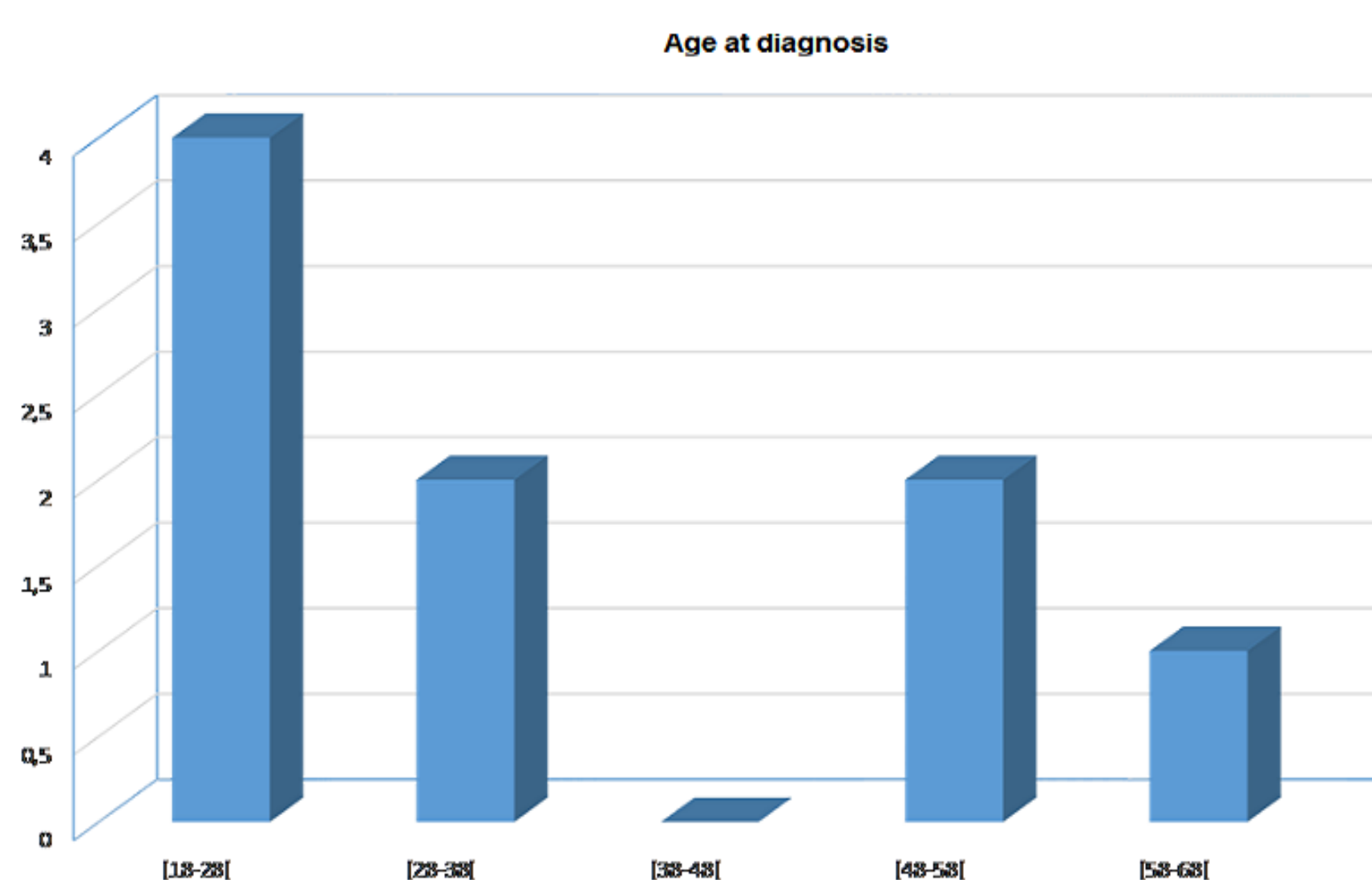
The purpose of this work is to analyze the clinical, biological and morphological aspects of insulinomas.

Patients and methods:

This is a retrospective study spanning 29 years (from 1984 until December 2013) concerning patients with insulinoma collected in our service.

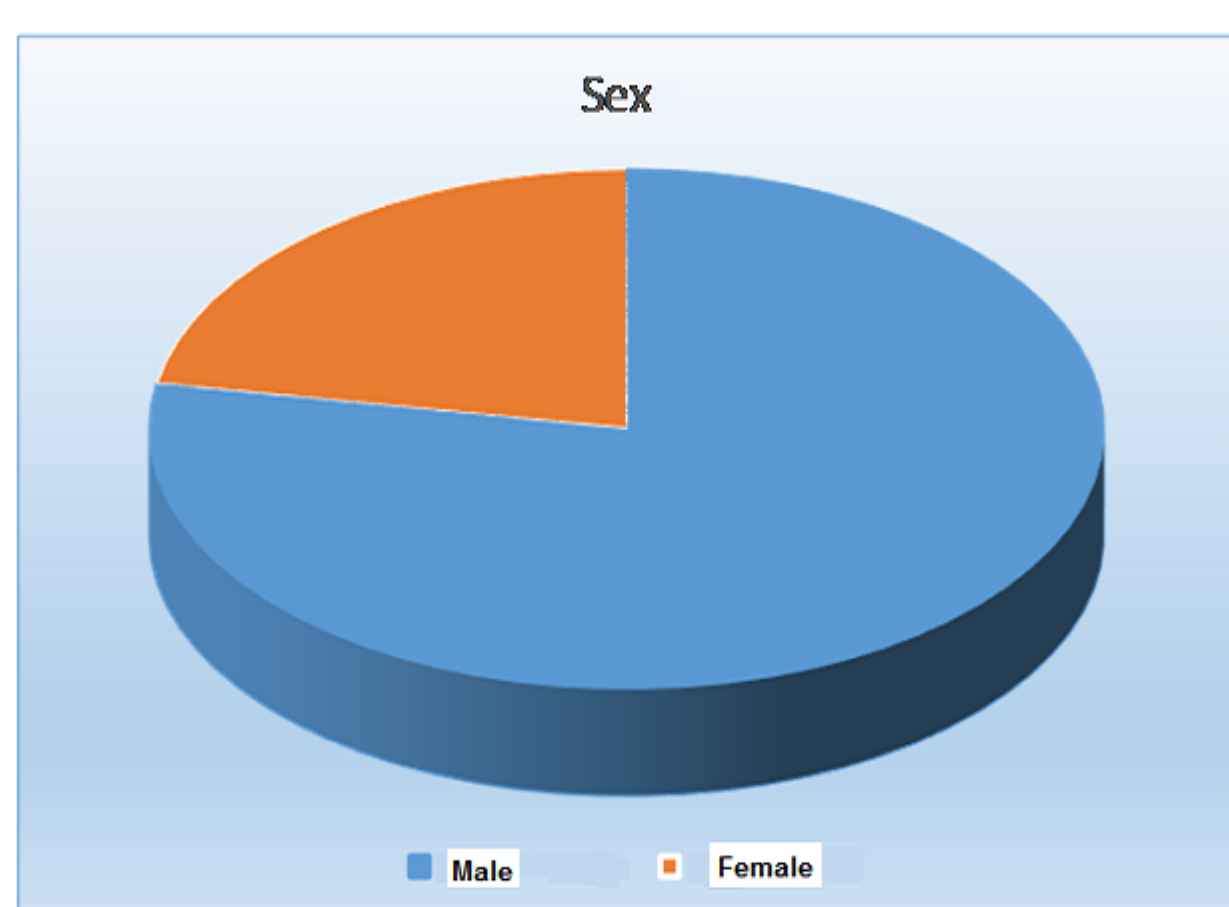
Results:

By age:

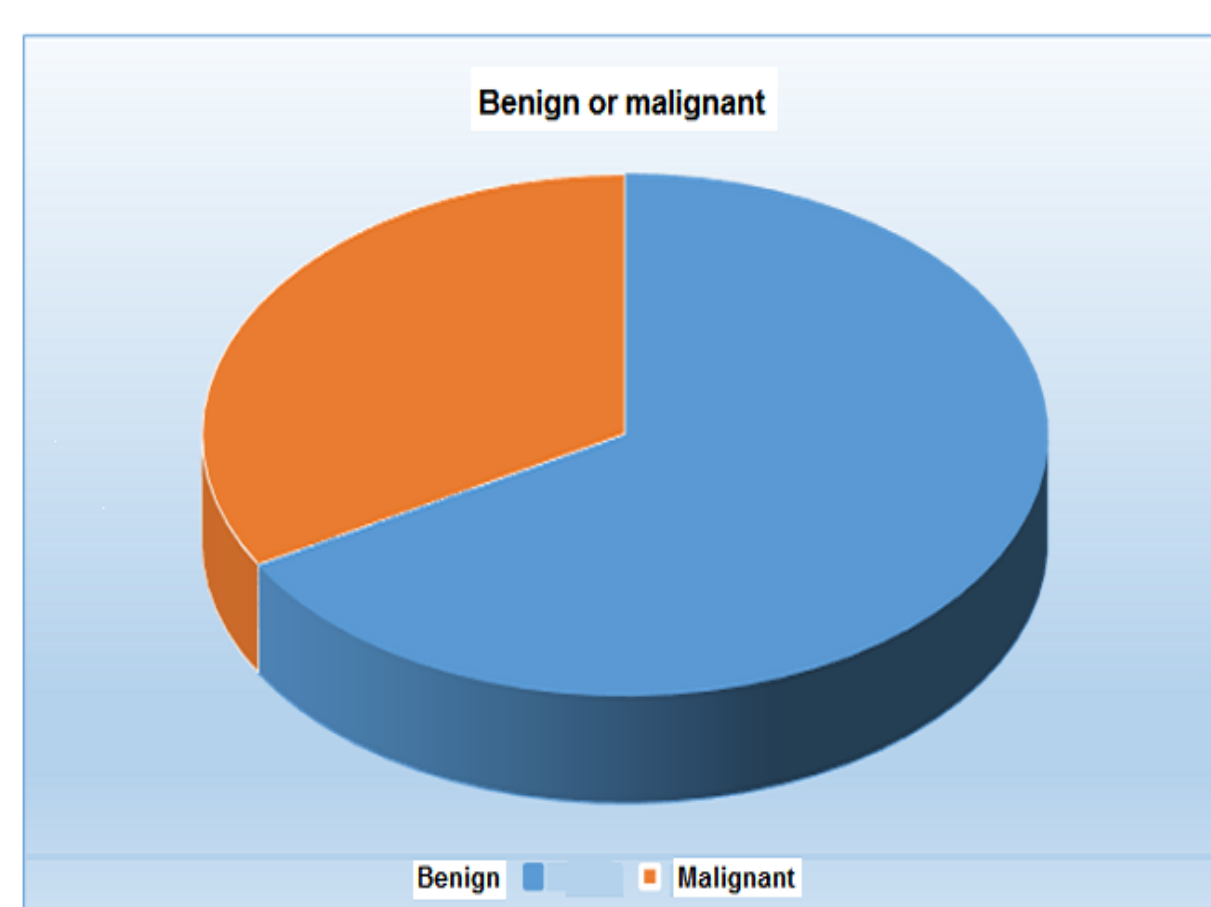


- Modal age: **18 and 34 years**
- Average age: **35 years** (18 to 66 years)

By sex

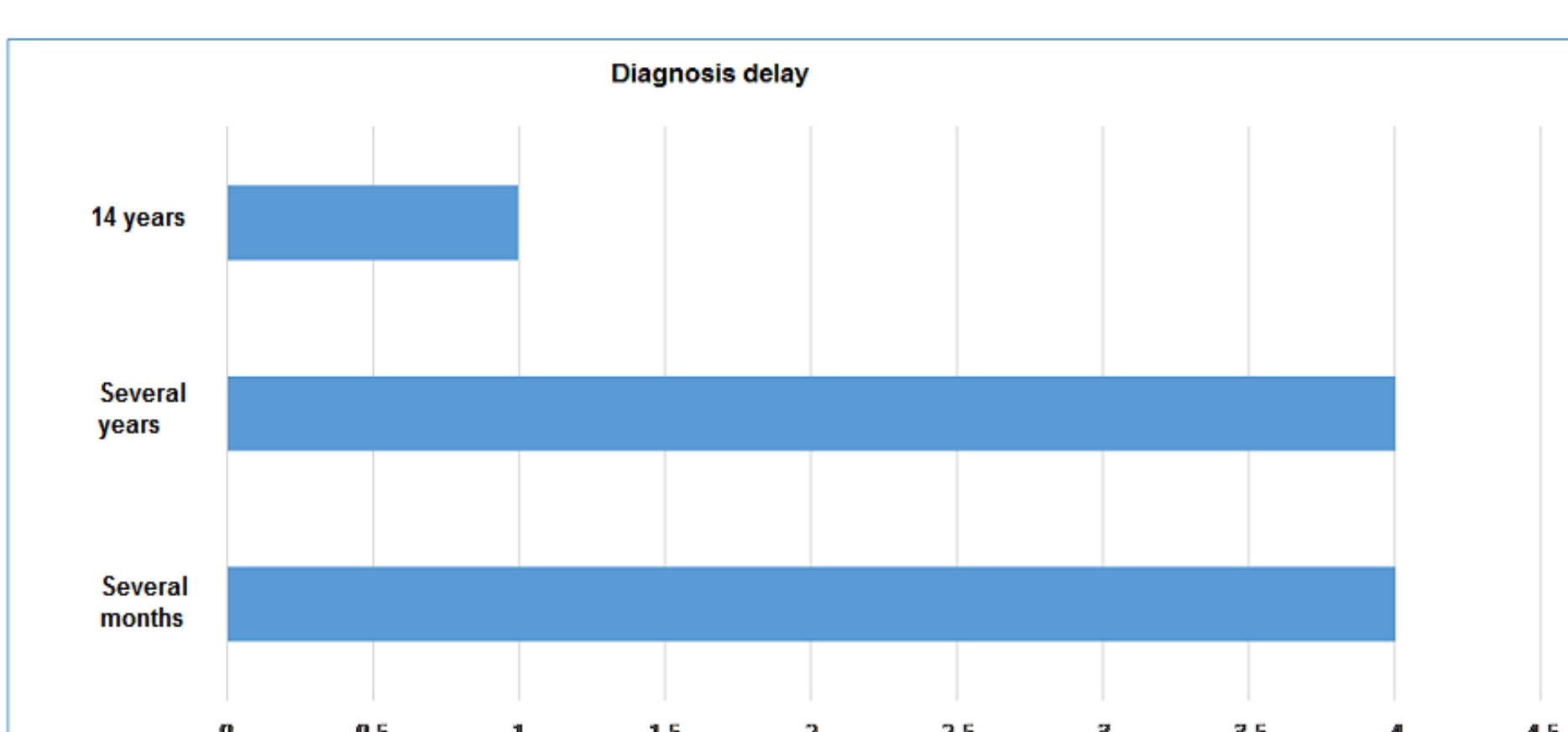


Benign or malignant



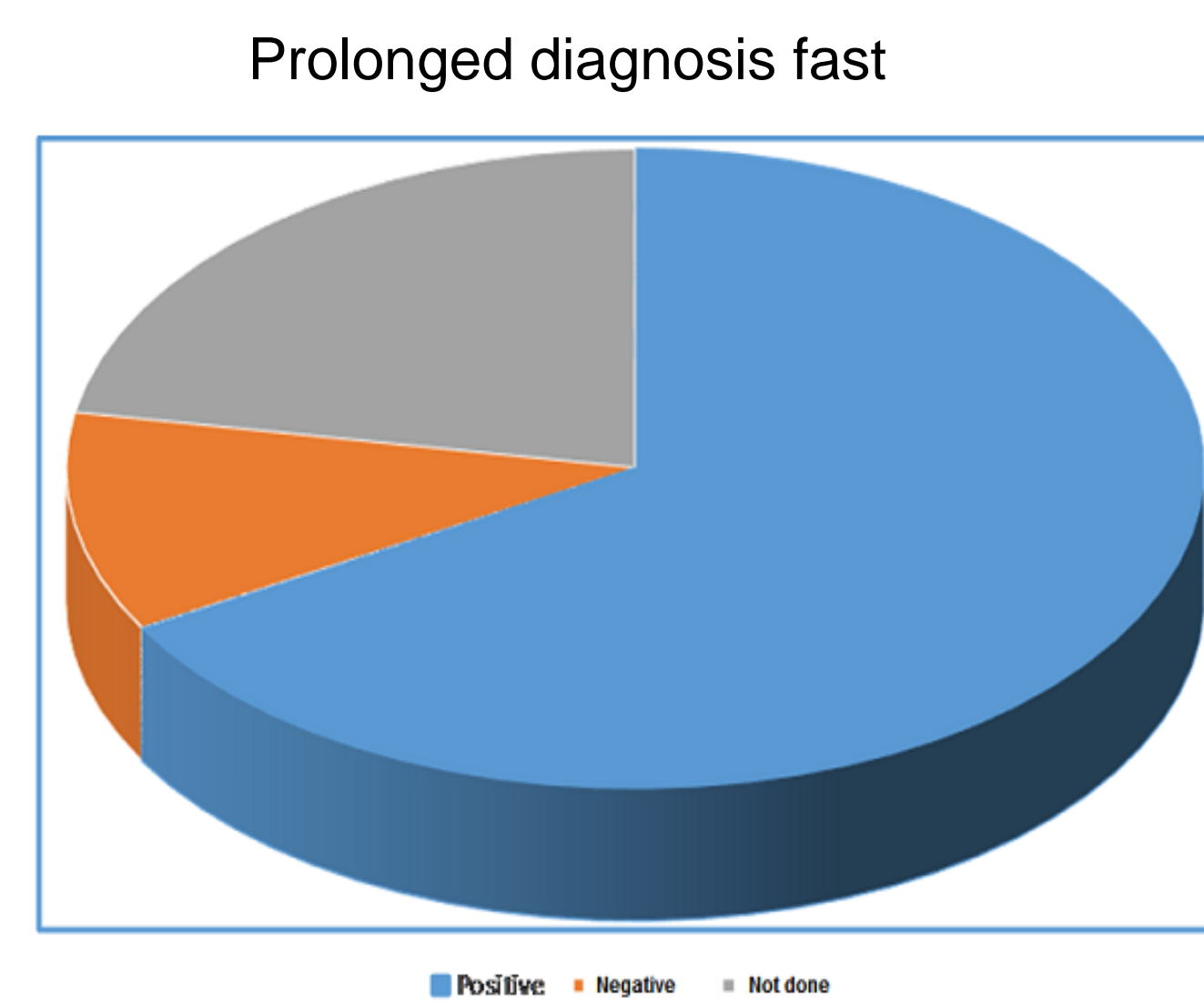
- Male predominance **77.77%** of cases
- **66,66%** benign
- Sporadic in **100%** of cases studied.

Delay in diagnosis::



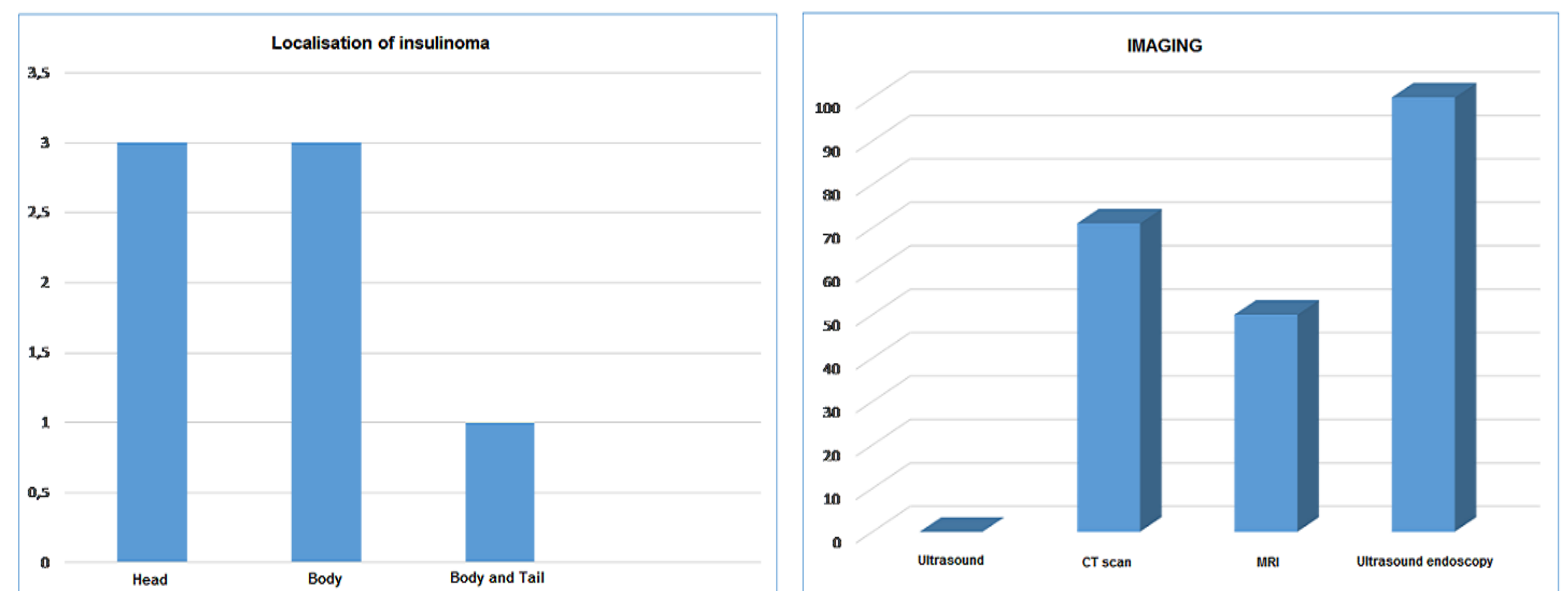
- Pathology was revealed in all cases by neuroglucopenic signs with a delay to diagnosis ranging from months to years.

According to biology:



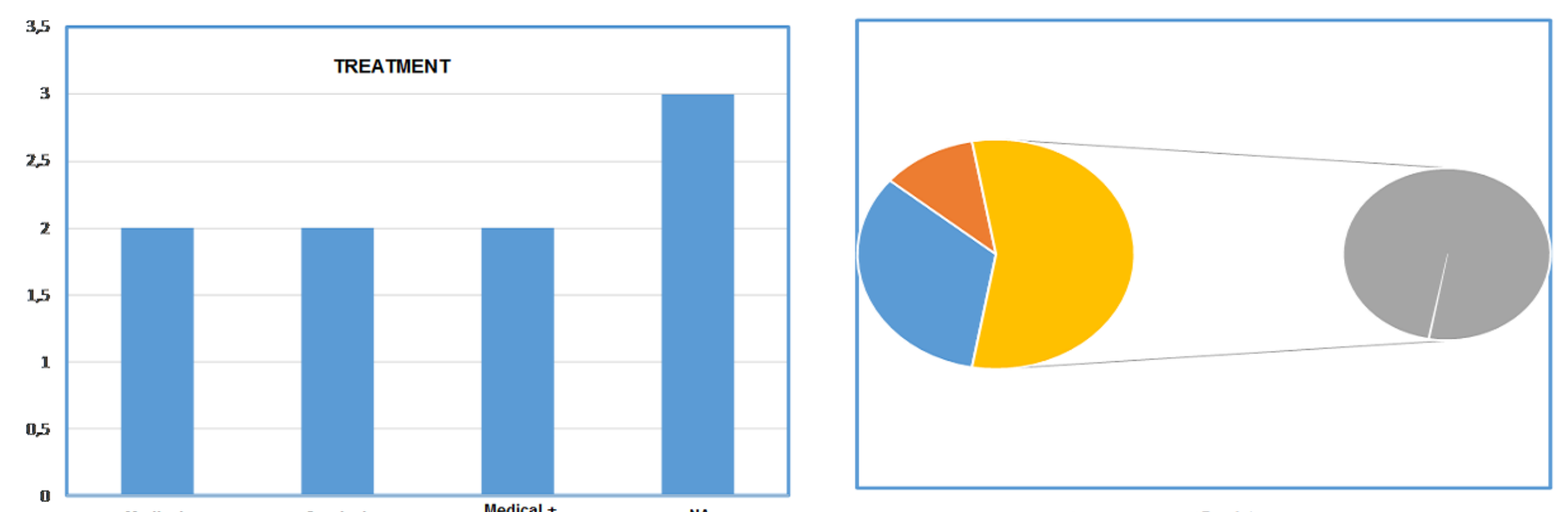
- Diagnosis fast was positive in **85.71%** of cases with **83.33%** from the first day.

Localisation:



- Insulinoma was essentially located in the head or body of the pancreas.
- It was visualized by ultrasound endoscopy in 100% of cases and by CT or MRI with less sensitivity.

Treatment and evolution:



- The treatment was either medical, surgical or medical + surgical with equal frequency of **22.22%** of cases.
- Resolution of hypoglycemia was obtained in **33.33%** of cases.

Discussion and conclusion:

In our series of insulinomas, we note the male predominance, it was often small, unique and sporadic tumors, malignant tumors were more frequent compared with literature data 33.33% vs 10% [3], finally ultrasound endoscopy has excellent sensitivity to diagnose insulinomas [4].

References:

- [1] Baudin E, Caron P, Lombard-Bohas C, Tabarin A, Mitry E, Reznick Y and al. Malignant insulinoma: Recommendations for characterisation and treatment. Annales d'Endocrinologie, December 2013;74 (523-533).
- [2] Mirallié E, Pattou F, Malvaux P, Filoche B, Godchaux JM, Maunoury V et al. Valeurs de l'écho endoscopie et de la scintigraphie des récepteurs de la somatostatine dans la localisation préopératoire des insulinomes et gastrinomes. Gastroentérologie Clinique et Biologique 2002;26 (360-366).
- [3] Sugiyama T, Kouyama R, Tani Y, Izumiyama H, Akashi T, Kishimoto S, et al. Giant malignant insulinoma which developed from a non-functioning pancreatic tumor over a long period of time. Intern Med 2010;49 (1573-1579).
- [4] SFE 2011. Indications et stratégies d'utilisation des principaux examens d'imagerie: Imagerie des tumeurs insulaires bêta pancréatiques. Item 5.