

BACKGROUND

- Duodenal duplication cysts are rare congenital malformations of the gastrointestinal tract
- Although the majority are benign, case reports have demonstrated a risk of malignancy
- The ideal treatment is complete surgical resection
- Advances in therapeutic endoscopy provide an alternative option for patients who are at a high risk of surgical complications
- Endoscopic marsupialization is a management option in which the cyst cavity contents are drained into the duodenum. Complications include duodenal perforation and bleeding
- However, the overall morbidity is low. Endoscopic surveillance is recommended in these patients to assess for recurrence.

CASE REPORT

- A 38-year-old female who was diagnosed with a large duodenal mass in the second part of the duodenum measuring 8 cm in the largest diameter (Figure 1.)
- An EGD and EUS was performed to characterize the duodenal mass. (Figure 2.)
- She was offered endoscopic marsupialization in October 2020 due to morbid obesity which increased the risk of perioperative complications (Figure 3.)

FIGURES



Figure 1. MRI Abdomen demonstrating a large, duodenal cystic mass

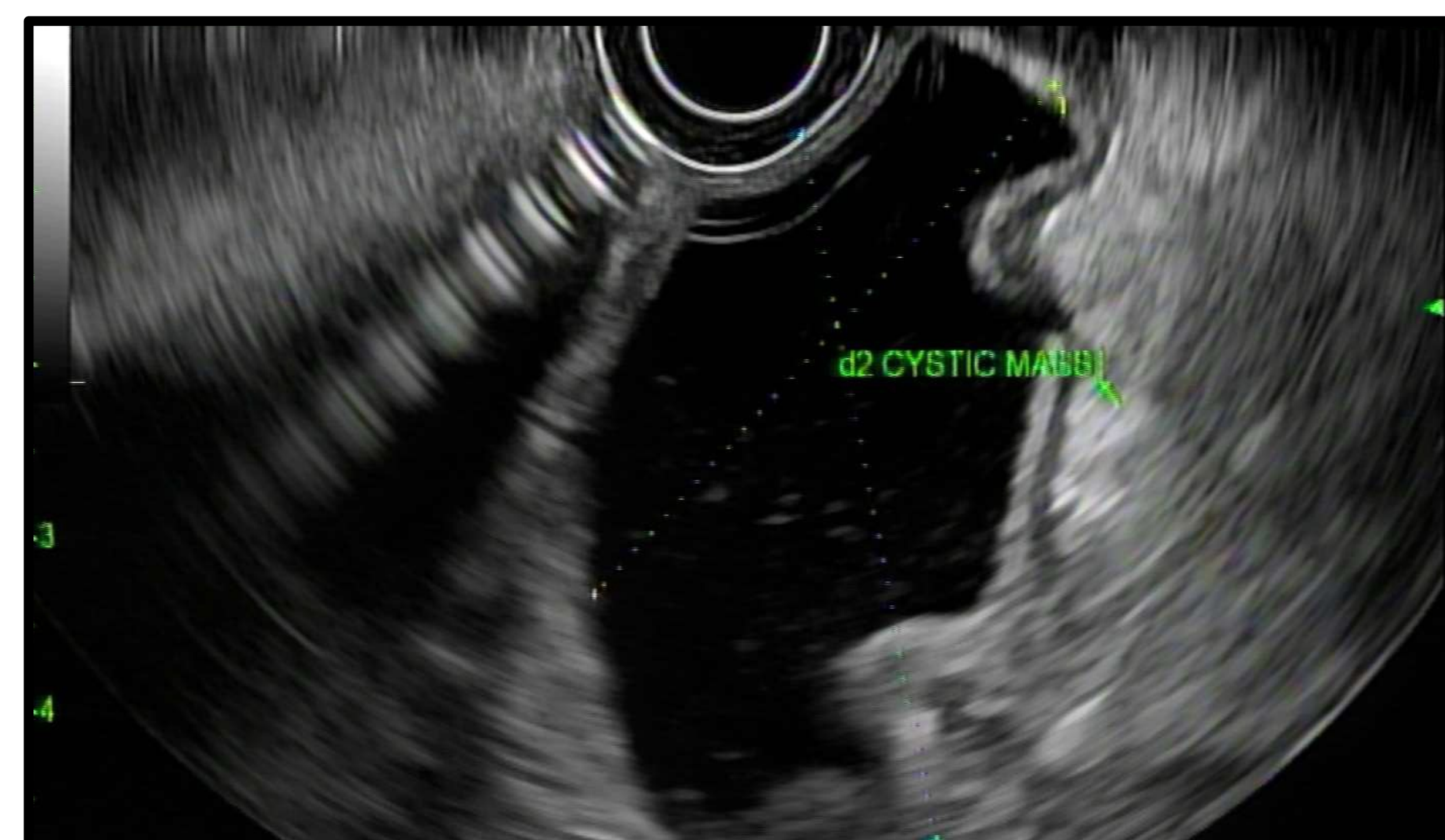


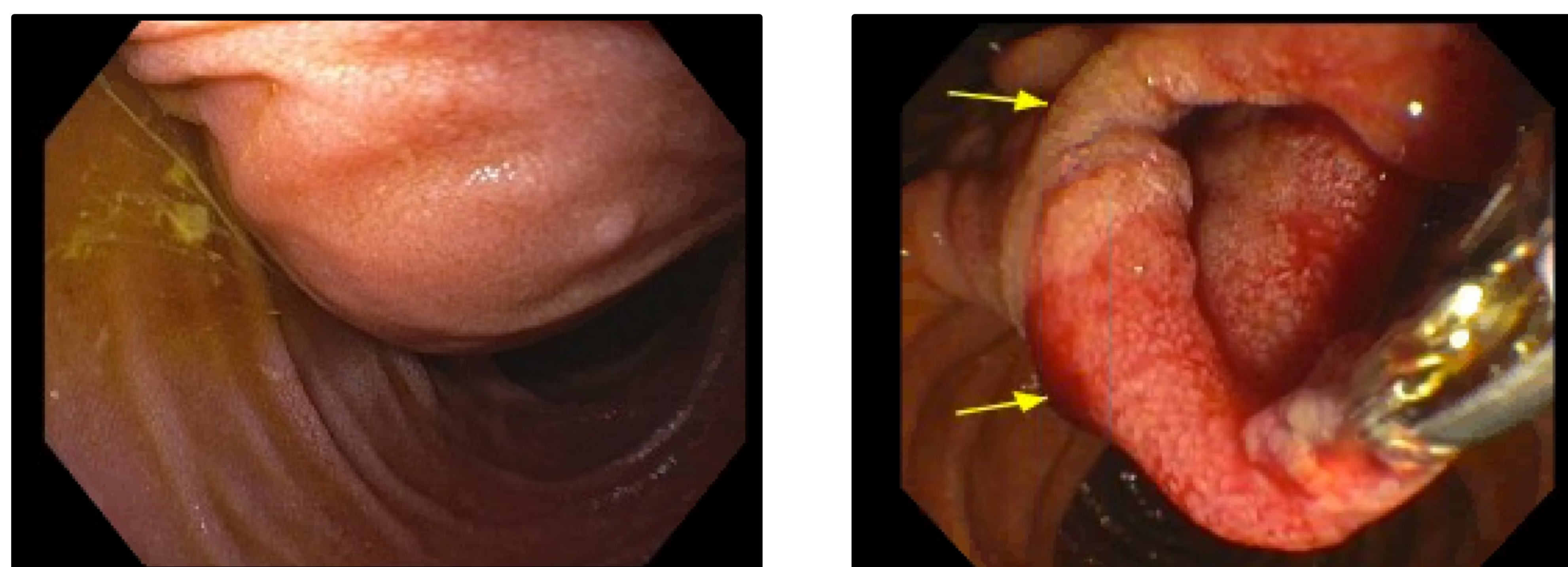
Figure 2. EUS demonstrating an intramural (subepithelial) cystic lesion measuring 48mm x 41 mm in the second portion of the duodenum

DISCUSSION

- The procedure was performed successfully
- Pathology from the lateral wall of the duodenal cyst was not consistent with a duodenal duplication cyst
- There were no early or delayed complications
- The patient had a follow-up endoscopy one year later which did not demonstrate evidence of recurrence on biopsies

CLINICAL IMPLICATIONS

- Surgical management is recommended for duodenal duplication cysts given the potential for malignancy
- Surgical treatment includes total pancreaticoduodenectomy
- Multidisciplinary approach can guide management
- Endoscopic marsupialization can be a minimally invasive option in select cases



Before

After

Figure 3. Endoscopic assessment of before and after the fenestration of the duodenal mass