

Expect Slimline (SL) Endoscopic Ultrasound Aspiration Needle for Diagnosis of Neuroendocrine Pancreatic Tumor



CASE PRESENTED BY:

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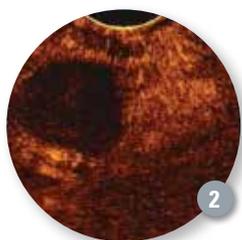


PATIENT HISTORY

A 58-year-old male had a CT scan performed during preoperative staging of prostate carcinoma that indicated an incidental finding of a solid nodule in the head of the pancreas.

PROCEDURE

Endoscopic ultrasound fine needle aspiration (EUS-FNA) was performed under deep propofol sedation, indicating a hypoechoic and homogeneous nodule located in the head of the pancreas. The lesion measured about 16mm with regular borders and appeared to be predominantly green at elastography evaluation (**Figure 1**).

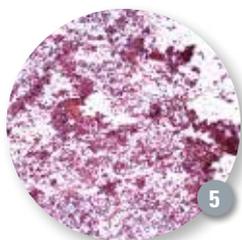


The Doppler signal was negative and after contrast agent infusion, the lesion showed a hypervascular pattern (**Figures 2 and 3**). FNA was performed using a 25 gauge Expect™ Slimline (SL) Endoscopic Ultrasound Aspiration Needle (**Figure 4**). The sharpness and flexibility of the needle allowed smooth access to the tumor. A slow-pull technique using the stylet was performed for capillary sampling. The actuation and precision of the puncture allowed us to obtain adequate material in a single pass, sufficient even to perform immunostaining.



CONCLUSION

Final cytological diagnosis was positive for neuroendocrine tumor (**Figure 5**). **This case nicely illustrates the efficacy of the 25 gauge Expect Slimline (SL) Endoscopic Ultrasound Aspiration Needle, allowing precise puncture to obtain an excellent cytology specimen.**



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