A Neuroendocrine Tumor Masked by Diverticular Stricture: The Silent Partner

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Introduction

Small intestinal neuroendocrine tumors (SI-NETs) are rare, however their incidence has increased over 3-fold in the past 30 years. Most cases are found incidentally and pose a grey area in regards to the benefit of further intervention. We present an incidental finding of a neuroendocrine tumor in a patient with diverticulitis and stress the need for evidence-based guidance in their management.

Clinical Description

- 64-year-old female with an unknown past medical and surgical history presented to the emergency department with increasing abdominal pain and distension over 6 weeks
- Associated symptoms: nausea, anorexia, obstipation and swelling of the extremities, unintentional 20 pound weight loss over 6 months
- Physical exam: tachycardia, abdomen tympanic and massively distended, expiratory wheezing, patient in obvious discomfort
- Labs: leukocytosis with metabolic acidosis
- Imaging: obstructing mass of the sigmoid colon, incompetent ileocecal valve with diffuse colonic distension
- Exploratory laparotomy revealed marked dilation of small and large bowel, adhesions and enteric, enterocolic and colovesicular fistulas

Discussion

- Resection ultimately lead to bladder repair, small bowel resections, serosal repairs and a sigmoid resection with a rectal pouch and end ostomy
- Pathology exam showed diverticulosis/diverticulitis with intramural and pericolic abscess, and fistulization into surrounding soft tissue, as well as a well-differentiated microscopic neuroendocrine tumor (2mm) in the small bowel fistula
- Indications for treatment of SI-NETs are based on a combination of tumor size, spread, and symptom severity
- There is little guidance in the literature for incidentally found, asymptomatic cases and no recommendations put forth by the North American Neuroendocrine Tumor Society
- Symptoms of SI-NETs include flushing, diarrhea, shortness of breath, and right sided heart failure, however symptoms are often vague or, increasingly, absent as in the presented case
- With the incidence of asymptomatic, incidentally discovered SI-NETs on the rise, we stress that more work must be done to characterize these cases and to identify reliable, predictive biomarkers to guide clinical decision making and management
- Additionally, we must work to better understand the long-term outcomes in these cases to better inform patients about the significance of their tumor and options for treatment or observation

References