NEUROENDOCRINE TUMORS OBSERVED IN ENDOCRINOLOGY: EP-1111

INTRODUCTION

Neuroendocrine tumors or TNE form from cells of the endocrine and neurological system at any point in the body and are characterized by their ability to secrete hormones and express protein markers. They are often benign, but some are malignant and can easily metastasize.

AIM

Describe clinical, paraclinical and scalable of TNE observed at our department of endocrinology outside medullary carcinoma and pheochromocytoma.

RESULTS

16 cases were observed. They represented by endocrine pancreatic tumors (n :10, 62.25%) and carcinoids (n :6, 37.5%).

The mean age at diagnosis was 43 ± 1.5 years (7 to 78 years) and sex ratio 1H / 2F. 66.6% of pancreatic tumors are secreting and revealed by an endocrine syndrome (60% insulinoma, 6.6% secrete TCT) and 33.3% non-secreting tumors discovered during abdominal pain. Average tumor size was 24 ± 0.4 mm (1 ± 0.4 cm: insulinoma and 7 ± 1 cm: other PET). 46% are malignant (size> 2 cm; 13% insulinoma; 33% others). 26% are metastatic, and 50% are well differentiated.

Carcinoid tumors are located at rectum (n :2), intestinal (n :1), thymus (n :1), and lung (n :6). They are malignant, well differentiated with slow evolution. All patients were successfully operated completed by antisécrétoir treatment or chemotherapy (10%). No recurrence or deaths were observed.

Figure 1 CT scan: Pancreatic lesion enhanced after contrast iodine injection

Figure 2 MRI: Pancreatic lesion enhanced after gadolinium injection

DISCUSSION AND CONCLUSION

NET are rare in endocrinology. They are dominated by tumors of the gastrointestinal system. They are often secreting and malignant tumors with slow-growing and generally good prognosis. Their medical management requires a multidisciplinary team and a long term follow up.