

Extra-hepatic portal vein obstruction (EHPVO): a case report

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Introduction

Extra-hepatic portal vein obstruction (EHPVO) and related splenomegaly are uncommon conditions. (incidence <1%).

Clinical case. Woman. 60 y.o. Outpatient visit for abdominal pain on the left. We found splenomegaly. Laboratory tests (all results normal, except for modest thrombocytopenia) and an abdomen ultrasound were performed. Ultrasound confirmation of splenomegaly (transverse diameter 20 cm), normal echo structure, and hypoechoic area (25 mm) in the pancreatic site. Abdominal CT scan: confirmed splenomegaly. The pancreatic lesion was highly likely to be heteroplasic with locally infiltrative aspects (spleno-mesenteric region and Wirsung) and with visibility of porto-systemic collateral circulation. This lesion could be held responsible for the clinical picture described above.

Discussion

Splenomegaly in our case is part of a picture of EHPVO, which in the past used to be defined as segmental or also left portal hypertension. In adults, it may be secondary to infiltration and/or compression/obstruction of the splenic vein by a pancreatic expansion process. This condition is characterized, as it results from the very few cases described in the literature, by preserved liver function and patent extra-hepatic portal vein. Therefore, we should be aware that EHPVO may be a complication of important pancreatic diseases, including neoplastic ones.