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Pancreatic neuroendocrine tumor secreting vasoactive intestinal peptide: Case report

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Objective: Neuroendocrine tumor secreting vasoactive intestinal polypeptide (VIPoma) is rare endocrine tumor.

Materials and Methods: To present a case report

Results: We report case of neuroendocrine tumor secretes vasoactive intestinal polypeptide (VIP) in a 42-year-old Thai female who presented with chronic watery diarrhea and hypokalemic metabolic acidosis for 1 year. The stool was watery, yellow color, non-bloody with volume of about 300 ml each time. Blood for vasoactive intestinal polypeptide level was 360 pg/mL (normal < 75). The computated tomography revealed mass at uncinate process of pancreatic head in parallel with increased tracer uptake at same area by octreotide scan. The patient had undergone partial pancreatectomy with complete resection of tumor. The pathology revealed 3 cm of pancreatic neuroendocrine tumor with producing vasoactive intestinal peptide (VIPoma) without lymphovascular invasion. After tumor resection, clinical symptoms of watery diarrhea and electrolyte abnormality were improved.

Conclusion: VIPoma is neuroendocrine tumor presenting with chronic watery diarrhea and hypokalemic metabolic acidosis. Surgical resection is gold standard of treatment.