

## ATYPICAL PRESENTATION OF CLL/SLL AS A PANCREATIC MASS

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**Background** : Chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL) is a mature B-cell neoplasm and the most prevalent leukemia in adults in Western countries, though it is less common in Asian populations and more frequently observed in males. This case involves a 54-year-old female with no underlying disease, who presented with an incidental finding of a pancreatic tumor.

**Methods** : A 54-year-old female with no underlying disease presented with left lower quadrant pain and dysuria. Initial evaluation with non-contrast MDCT revealed a 0.4 cm ureterovesical junction stone without associated hydroureter or hydronephrosis, as well as an incidental 2.6 x 3.8 x 5.1 cm isodense soft tissue mass in the gastrohepatic region abutting the pancreatic tail. Subsequent contrast-enhanced MDCT identified a well-defined, enhancing lesion measuring 2.4 x 3.7 cm attached to the antero-superior aspect of the pancreatic body, raising suspicion for an exophytic pancreatic tumor. The patient underwent laparoscopic spleen-preserving distal pancreatectomy.

**Results** : Histopathological analysis of the resected specimen revealed chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL) involving an adjacent lymph node.

**Conclusions** : This case underscores the importance of investigating incidental findings on imaging. Although the mass initially mimicked a pancreatic tumor, a multidisciplinary approach and surgical intervention led to a definitive diagnosis of CLL/SLL. Clinicians should be aware of extranodal presentations of lymphoma that can mimic primary organ tumors.

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