



A case report of a pregnancy after Whipple's Procedure

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Objective

A Whipple procedure or Kausch-Whipple procedure, also known as a pancreaticoduodenectomy, is a complex operation to remove the head of the pancreas, the first part of the small intestine (duodenum), the gallbladder and the bile duct. The Whipple's procedure is a major surgical operation used to remove cancerous tumours of the head of the pancreas. It is also used for the treatment of other disorders of the pancreas, intestine and bile duct. A review of the literature did not find any article reporting a pregnancy following Whipple's operation.

Methods

This is the first case of a pregnancy following Whipple's Procedure.

Results

A 33 years old women, gravida 4, parity 2, was admitted in our department at 9 weeks of gestation. The patient had history nausea, vomiting occuring especially after meals, weight loss and epigastric pain. The abdominal MRI showed a pancreatic mass nearly 4. 5x6x6. 5 cm at the uncinat process of pancreas. Alaparoscopic pancreaticoduodenectomy was performed. The anatomopathology confirmed the presence of solid pseudopapillary tumors. The follow up of the pregnancy did not reveal ny abnormality including the first and second trimester screening for chromosomal defects, the Oral glucose tolerance test was norma, the growth velocity and the fetal well being. A C-section was performed at 37 weeks of gestation for fetal distress duting the first stage of labor with a delivery of a 2820 gr male, APGAR 6/8. During the post operative follow up, the patient developed a sepsis fevealed an intrahepatic abcess which was drained percutaneously. The patient was discharged after three weeks of hospitalization.

Conclusion

The laparoscopic whipple's procedure is not only feasible but also safe, with low mortality and less complications than the open whipple's procedure. Complications after operation can be nutritional deficiency and subsequent development of gestational diabetes. Pregnancy loss, growth restriction and preterm birth can be expected so close follow up during pregnancy is necessary. This case reports a late complication of whipple's procedure which is abcess formation during pregnancy. Displacement upwars of abdominal organs by a growing uterus and thickened bile secretion may increase the risk of late complications of whipple's procedure during pregnancy.