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Background: The aims of this study were to introduce our current situation of diagnosis and treatment of pancreatic cystic neoplasm (PCN) in China.

Methods: A total of 2,251 PCN patients who underwent surgical resection from January 2006 to December 2016 in 16 institutions were retrospectively analyzed.

Results: The male to female ratio was 1 to 2.4, and the age at diagnosis was 47.5 years (range, 8–89 years). The preoperative diagnostic coincidence rate of solid pseudo-papillary tumor (SPT) was 48.5%, serous cystic neoplasm (SCN) was 13.7%, intraductal papillary mucinous neoplasm (IPMN) was 49.7, mucinous cystic neoplasm (MCN) was 15.6% respectively and the PCN was 33%. SPT, SCN, IPMN, MCN were 713 cases, 678 cases, 495 cases, 365 cases respectively by pathologically diagnosed, and the malignant transformation rate was 12.3%, 0.6%, 32.1%, 10.4% respectively. The rate of postoperative complications was 46%, the pancreatic fistula (PF) and delayed gastric emptying (DGE) were the main complications. The tumor marker, such as CEA, CA19-9, CA125, was significantly increased in the malignant group.

Conclusions: SPT maybe the most common tumor in all PCN in China. Improving the accuracy of subtype (especially the SCN and the MCN) diagnosis preoperatively can avoid unnecessary surgery.

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