Dear editor,

We read with interest the article by Pablo et al. [1]. We appreciate that they shared their experience in risk factors associated with recurrence in patients with solid-pseudopapillary tumor (SPT) of the pancreas, however we have several concerns regarding their study.

The authors stated that, lymphovascular invasion ($P=0.04$) was one of the risk factors associated with recurrence. Nevertheless, there was only one lymphovascular invasion detected in SPT cases either with recurrences (1/3) or without recurrences (1/29). Additionally, Jeannelyn et al. showed the different result ($P=0.10$) regarding lymphovascular invasion as one of the risk factors associated with recurrence in their study, which concerns 64 patients with SPT (including at least 6 patients with lymphovascular invasion, 6/64) [2]. Due to the scarcity of patients with lymphovascular invasion in the author’s present study, it may be difficult to establish a definite conclusion that patients who developed recurrences more commonly had lymphovascular invasion.

They also stated that there were 3 patients out of 32 (9.4%) who suffered recurrence. The rate of recurrence of SPT was much lower in the other two larger series reported by Kim et al. (2/106, 1.9%) and our institution (2/115, 1.7%) [3, 4]. Given the relative small size of sample, the demographic distribution of SPT in their study may prevent them from making a persuasive conclusion.

In addition, based on the 2010 WHO histological criteria [5], Kim et al. reported that 17 patients out of 106 (16%) had a SPN with histological findings of high-grade malignancy [3]. Furthermore, all 2 patients of recurrence of SPT were of high-grade malignancy. In your opinions, does the degree of malignancy play a role as a risk factor of recurrence of SPT?

Overall, we agree with Pablo et al. that lymphovascular invasion may be associated with aggressive behavior. However, in our point of view, whether SPT with lymphovascular invasion are associated with higher risk of recurrence needs further study.

Conflict of Interest
Authors declare to have no conflict of interest.

References