### Background
- Pancreatic cystic lesions (PCLs) are at the forefront of incidentally found lesions
- They are a core element to a pancreatic surgical practice
- 10 of reactions
- Immense clinical challenge
- Diagnositic uncertainty
- Management dilemmas
- The options: surgery vs. surveillance

### Methods
- Inclusion criteria: living patients following resection for a pancreatic cyst by 12 surgeons at 2 specialty centers (2004-2016)
- 62-question survey (yes/no, Likert scale, multiple choice questions)
- Administered via multiple platforms
- Compared to prospectively collected clinical data

### Results
#### Patient Preferences
- Majority of patients reported that at the time of the original decision-making, they were confident surgery was the right decision (93.6%)
- 99.1% felt that surgery was the best option
- 85.7% even felt that surgery was the only option
- 84.5% felt they had the right amount of involvement in the decision-making process

#### Patient Satisfaction
- At a median time of 32 months since surgery, patients were quite or fully satisfied with:
  - Only 2.8% would change decision to have surgery
  - High satisfaction rates regardless of:
    - Time between date of surgery and survey completion
    - Type of resection
    - Occurrence of postoperative complications
    - Presence of malignancy and grade of dysplasia
    - Discordancy between suspected and actual diagnosis
    - Lifestyle changes — except for excise insufficiency negatively impacting the decision-making process

### Conclusion
- Fear of cancer = main influence in decision-making
- High patient satisfaction regardless of:
  - Type of resection
  - Complications
  - Malignancy and grade of dysplasia
- Factors associated with satisfaction:
  - Knowledge and understanding
  - Consistency between patients' preferred and actual involvement in the process