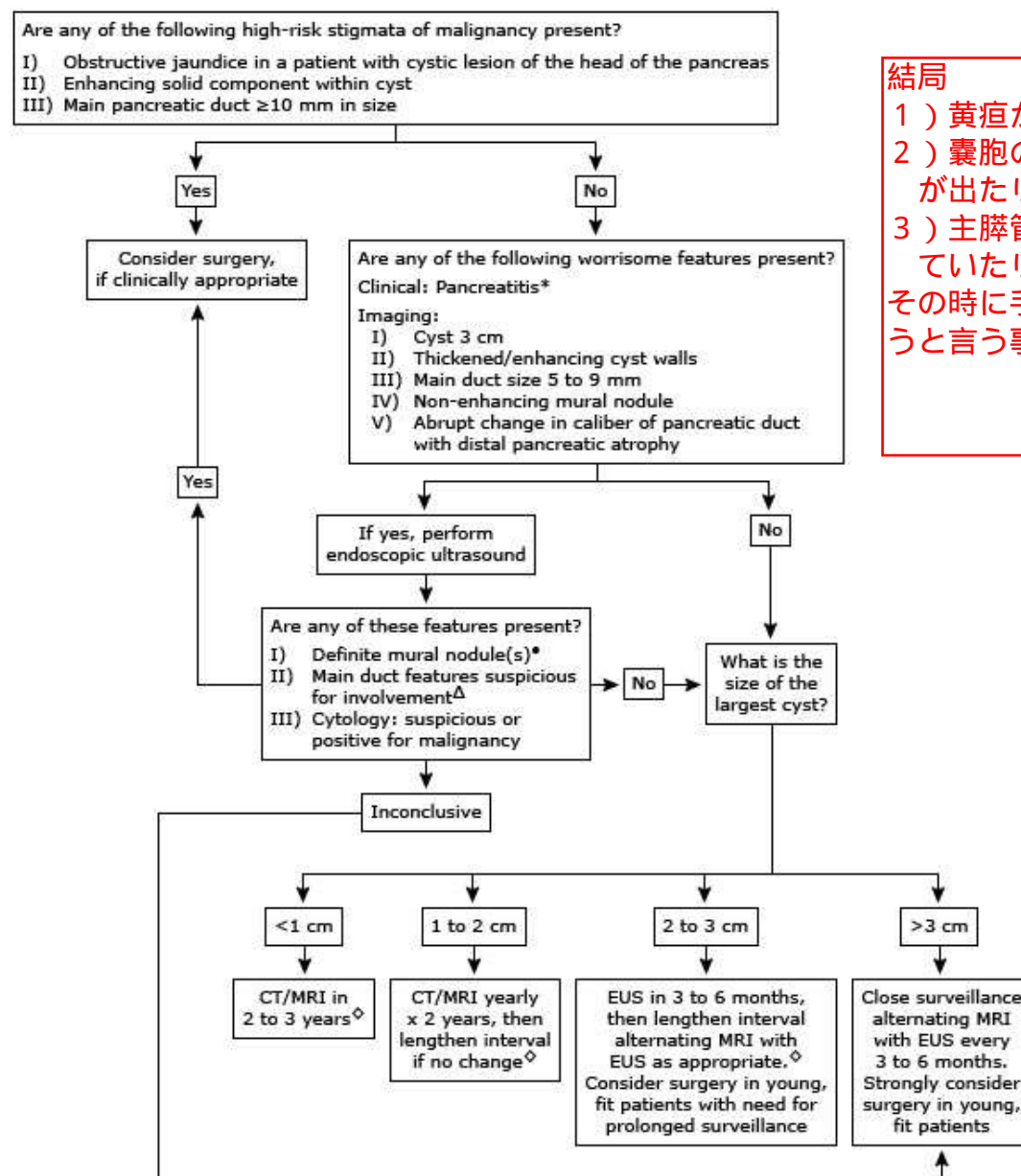


Algorithm for the management of suspected branch-duct intraductal papillary mucinous neoplasm (IPMN) of the pancreas



結局

- 1) 黄疸が出たり
 - 2) 嚢胞の中に腫瘍性病変が出たり
 - 3) 主膵管が1cmと拡張していたり
- その時に手術を考えましょうという事でしょうか。

* Pancreatitis may be an indication for surgery for relief of symptoms.

• Differential diagnosis includes mucin. Mucin can move with change in patient position, may be dislodged on cyst lavage, and does not have Doppler flow. Features of true tumor nodule include lack of mobility, presence of Doppler flow, and FNA of nodule showing tumor tissue.

Δ Presence of any one of thickened walls, intraductal mucin, or mural nodules is suggestive of main duct involvement. In their absence, main duct involvement is inconclusive.

◇ Studies from Japan suggest that on follow-up of subjects with suspected BD-IPMN, there is increased incidence of pancreatic ductal adenocarcinoma unrelated to malignant transformation of the BD-IPMN(s) being followed. However, it is unclear if imaging surveillance can detect early ductal adenocarcinoma, and, if so, at what interval surveillance imaging should be performed.

BD: branch duct; CT: computed tomography scan; EUS: endoscopic ultrasound; MRI: magnetic resonance imaging.