[PICTURES IN CLINICAL MEDICINE]

Ectopic Pancreatitis of the Jejunal Mesentery

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Key words: pancreatitis, ectopic pancreas, jejunal mesentery

(Intern Med 57: 903-904, 2018)

(DOI: 10.2169/internalmedicine.9548-17)

Picture 1.

Picture 2.

Picture 3.

A 55-year-old woman presented with acute-onset epigastria. Her laboratory data showed elevated serum levels of pancreatic enzymes and inflammatory markers (P-amylase, 521 U/L; lipase, 750 U/L; C-Reactive protein, 14.21 mg/dL). Computed tomography revealed a mass in the mesenteric soft tissue surrounded by inflammatory changes that included a duct-like structure in the jejunal mesentery apart from the normal orthotopic pancreas. Magnetic resonance cholangiopancreatography revealed an ectopic pancreatic duct (Picture 1). Based on these observations, acute pancreatitis of ectopic pancreas (EP) was suspected. Partial resection of small bowel was performed due to a repeated episode of pancreatitis in a short period. During operation, a mass was recognized within the jejunal mesentery (Picture 2). The pathological diagnosis was EP in the jejunal subserosa (Picture 3). There was no recurrence of pancreatitis after surgery. Patients with EP are reported to develop severe complications, including pancreatitis, perforation and malignant degeneration (1-3). Surgical resection should be considered in case of symptomatic EP.

The authors state that they have no Conflict of Interest (COI).

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Received: May 24, 2017; Accepted: July 3, 2017; Advance Publication by J-STAGE: November 20, 2017

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Intern Med 57: 903-904, 2018