

Evaluation of a pancreatic mass using PENTAX Medical EG-3270UK

PENTAX
MEDICAL

Case Study

For Medical Professionals

Patient History

A 65 year old male patient was referred to our department with dyspepsia, abdominal pain and weight loss.

The trans-abdominal ultrasound examination described a dilation of the pancreatic duct and of the body and tail of the pancreas, with no clear evidence of a pancreatic mass.

The patient underwent CT scan, that showed a pancreatic head mass. An EUS was scheduled.

EGD Findings:

The EUS assisted with visualization of a focal solid lesion of the pancreatic isthmus. The lesion was hypoechoic, with irregular borders, causing a stenosis of the pancreatic duct.

The superior mesenteric vein and portal confluence were encased by the lesion.

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Elastography (calculating average-hue histograms) showed that the lesion was hard (blue) and with a pathological strain ratio (240.7).

EUS-guided fine needle aspiration of the lesion was performed using a 25G needle, and the sample was adequate for a pancreatic adenocarcinoma.

Patient Follow-up and Outcome:

The lesion was locally advanced, so the patient was referred to the oncologist for chemotherapy.

Summary

For this case, the EG-3270UK was suitable to perform a standard EUS procedure including EUS-FNA.



Image 1: Pancreatic mass of the isthmus, with dilation of wirsung (PD)

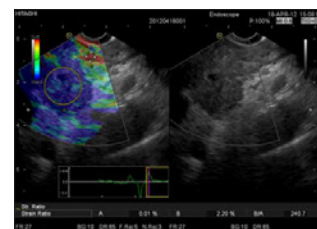


Image 2: Elastography evaluation

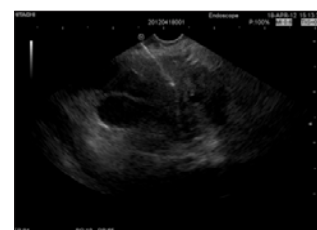


Image 3: EUS-FNA with a 25 Gauge needle

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