

Acute Pancreatitis in a Patient with Pancreas Divisum and Polycystic Kidney Disease

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MEDICAL IMAGES

The authors report a case of an 80-year-old man with a personal history of hypertension, diabetes mellitus, acute stroke without permanent sequelae and chronic kidney disease who presented to an emergency department with abdominal pain. Acute pancreatitis was confirmed by elevations in the amylase and lipase and he was hospitalized.

The etiology of acute pancreatitis is often difficult to determine. The patient had been studied with magnetic resonance (MR) imaging that revealed the existence of pancreas divisum, one pancreatic pseudocyst (Figure-1) and polycystic kidney disease (Figure-2).

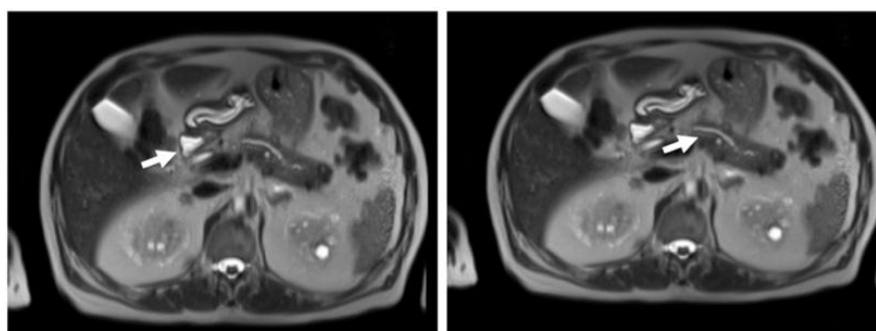


Fig-1: (A) Pancreatic cyst and (B) Pancreas divisum at MR Imaging sequences



Fig-2: Polycystic kidney disease

The association between pancreatic cysts and polycystic kidney disease was described at the medical literature. Probably our patient had a PKD2 gene mutation but was not tested. On the other hand the divisum pancreas is a predisposing factor for acute pancreatitis. The authors highlight the tremendous importance of an exhaustive investigation about acute pancreatitis causes after the early disease manifestation.

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