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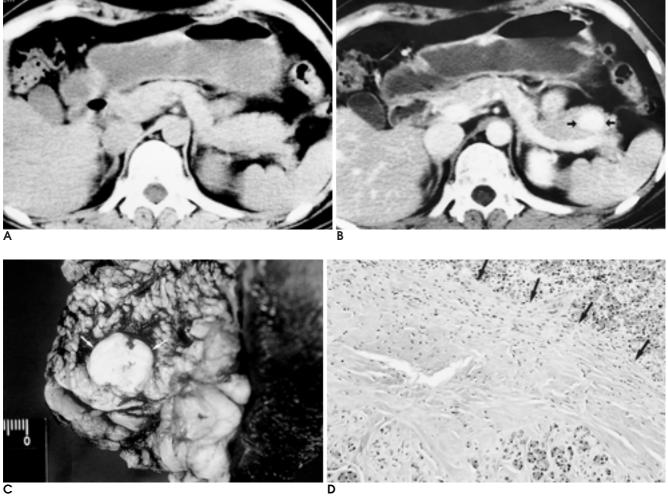


Fig. 1. Inflammatory pseudotumor of the pancreas in a 40-year-old woman.

A. The lesion in the pancreatic tail is not seen on non-contrast CT scan.

B. Contrast-enhanced CT scan (equilibrium phase) shows a well defined nodule with homogeneous enhancement (arrows) in the pancreatic tail.

C. The cut surface of gross specimen shows a yellowish-white, solid mass (arrows) in the pancreatic tail.

D. Photomicrograph of pancreatic mass (arrows) shows extensive fibrosis and collagen deposition with sparsely distributed spindle cells, and atrophy of pancreatic acini (H & E stain, \times 100).

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Inflammatory Pseudotumor of the Pancreas: A Case Report¹

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Inflammatory pseudotumors are tumor-like benign lesions of uncertain pathogenesis and have most commonly been reported in the lungs. In the pancreas they are rare. We describe a case of inflammatory pseudotumor of the pancreas which was seen to be isoattenuating at non-contrast CT, and as a well-defined nodule with homogeneous enhancement in the pancreatic tail at contrast-enhanced CT. After a preoperative diagnosis of islet cell tumor, partial pancreatectomy of the pancreatic tail, with splenectomy, was performed. The gross specimen was a yellowish-white, solid mass and the lesion was histopathologically confirmed as inflammatory pseudotumor with an extensive area of sparse cellular fibrosis and collagen deposition.

Index words : Pancreas, diseases Pancreas, CT

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