

## Usefulness of endoscopic ultrasonography for the diagnoses of chronic pancreatitis.

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We report usefulness of endoscopic ultrasonography (EUS) for the diagnoses of chronic pancreatitis (CP). We evaluated EUS features of hyperechoic foci, hyperechoic strand, lobular out gland margin, lobularity, cyst, stone, ductal dilatation, side branch dilatation, duct irregularity, hyperechoic duct margins, atrophy, localized swelling in cases with CP (30 definite and 6 probable) diagnosed by computed tomography (CT) or endoscopic retrograde cholangiopancreatography (ERCP). Hyperechoic foci, hyperechoic strand, lobularity, hyperechoic duct margins in definite or probable CP were recognized in more than 80% cases. Lobular out gland margin was observed in 14 (47%) of 30 cases with definite CP, although none with probable CP ( $P=0.06$ ). In conclusions, hyperechoic foci, hyperechoic strand, lobularity, hyperechoic duct margins are useful for screening of CP, and lobular out gland margin would be reliable finding in definite CP.

Fig. 1

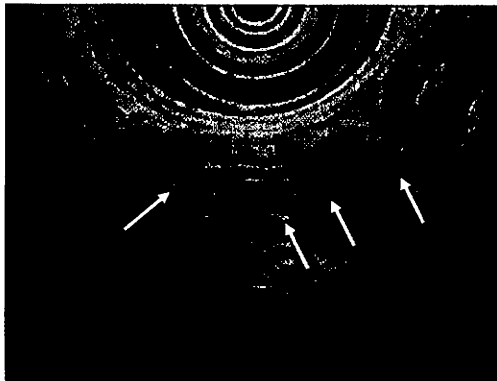


Fig. 2

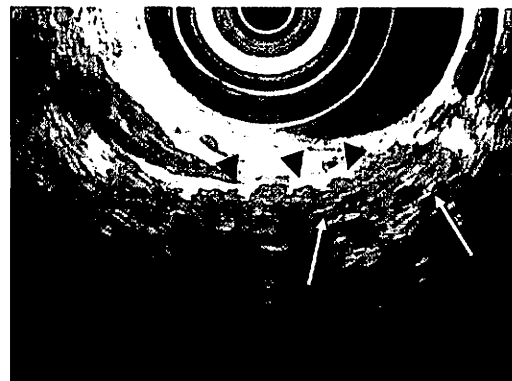


Fig. 1 Endoscopic ultrasonography showing hyperechoic foci (arrow) and hyperechoic duct margins (arrowhead).

Fig. 2 Endoscopic ultrasonography showing hyperechoic strand (arrow) and lobular out gland margin (arrowhead).