PRELIMINARY STUDY RESULTS OF PANCREATIC FIBROSIS ASSESSMENT BY MULTIDETECTOR COMPUTED TOMOGRAPHY

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Multidetector computed tomography enhancement characteristics correlate with pancreatic fibrosis grade and morphological signs of chronic pancreatitis, offering potential for non-invasive fibrosis assessment.

KEY POINTS

- Unenhanced pancreatic density values were significantly lower in patients with moderate and severe pancreatic fibrosis compared to mild fibrosis, and differed significantly based on intralobular fibrosis grade.
- Contrast enhancement ratio values were significantly higher in patients with severe pancreatic fibrosis and differed significantly between groups divided by perilobular fibrosis grade.
- Patients with pancreatic inflammation signs had significantly lower unenhanced pancreas density (33.1±11 HU) than those without inflammation (40.8±5.9 HU, p=0.01), and similar differences were seen with pancreatic duct epithelium metaplasia.
- Normalized contrast enhancement ratios during venous phase showed significant differences related to pancreatic duct epithelium metaplasia (p=0.02), morphological signs of inflammation (p=0.017), and perilobular fibrosis grade (p=0.04).
- The study analyzed contrast-enhanced 128-row MDCT data from patients who underwent pancreatic surgery for benign and malignant tumors as well as advanced chronic pancreatitis, with fibrosis graded by experienced pathologists using the Klöppel and Maillet scoring system.

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