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Summary

PREVALENCE AND NATURAL COURSE OF MRI-DIAGNOSED DILATED MAIN PANCREATIC DUCT: A LONGITUDINAL, POPULATION-BASED PROSPECTIVE COHORT STUDY WITH A TEN-YEAR FOLLOW-UP

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In this prospective population-based MRI study of 2985 adults followed for approximately 11 years, pancreatic main duct dilation of 5 mm or greater was found in 2.7% of individuals and was associated with a 2.5% risk of pancreatic cancer compared to 0.8% in controls.

KEY POINTS

- Pancreatic main duct dilation defined as 5 mm or greater had a prevalence of 2.7% (81/2985) in the general population, with cumulative 5-year incidence of 1.1% and 10-year incidence of 3.0%.
- After median follow-up of 4.5 years, pancreatic cancer was diagnosed in 2.5% of individuals with pancreatic main duct dilation versus 0.8% in controls, with significantly lower pancreatic cancer-specific survival (HR 4.96, 95% CI 1.31–18.84).
- Chronic pancreatitis was diagnosed much more frequently than pancreatic cancer in the pancreatic main duct dilation group (9.9% vs. 1.6% in controls), occurring four times as often as pancreatic cancer.
- Active smoking (PR 2.93), diabetes (PR 2.58), and frequent alcohol abuse (PR 1.78) were strongly associated with pancreatic main duct dilation in Poisson regression analysis.
- Mean age of individuals with pancreatic main duct dilation was 55.1 years, and longitudinal MRI with MRCP was performed an average of 2.2 times per participant over 10.8 years.

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