

DIFFUSION-WEIGHTED MRI IS AN INDEX FOR DIFFERENTIATING BENIGN AND MALIGNANT INTRADUCTAL PAPILLARY MUCINOUS NEOPLASMS

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Poster

Pancreas

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A retrospective study of 48 resected intraductal papillary mucinous neoplasms found that diffusion-weighted MRI demonstrated diagnostic performance comparable to high-risk stigmata criteria for detecting malignancy.

KEY POINTS

- Diffusion-weighted MRI showed 68% sensitivity and 88% specificity for malignancy detection, with positive diagnostic value of 80%, comparable to high-risk stigmata criteria (81% sensitivity, 70% specificity, 75% positive diagnostic value).
- Contrast-enhanced nodules greater than 5 mm (7.4% versus 52.4%, $P<0.01$) and DW-MRI positivity (12% versus 68%, $P<0.01$) differed significantly between benign and malignant groups.
- HbA1c was higher in the malignant group (5.9 versus 6.7, $P=0.03$), while age, pancreatitis history, and serum tumor markers did not differ significantly between groups.
- Among 48 patients with resected IPMN, high-risk stigmata were present in 52% of cases with a 68% malignancy rate, while worrisome features were present in 42% with a 20% malignancy rate.
- Areas of high-grade dysplasia and invasion corresponded to nodule presence and pancreatic duct stenosis on imaging.

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