

Case	(301) Pancreatitis as complication of pancreas transplantation
Authors	A. Andueza, I. Andres, C. Garcia.
Centre	Radiodiagnostico Hospital Universitario Puerta Del Mar.

## CASE PRESENTATION

46 years old woman with a 24 hours-evolution abdominal pain and vomits. Pancreas and kidney transplant in 2014. Plain abdominal radiography shows air/water levels (image A). Intestinal obstruction was suspected and an urgent Computer Tomography (CT) was required to us. CT showed dilation of the small bowel with transitional zone in ileocaecal junction (imagen C).

Pancreatic graft was located in the right flank with parenchymal edema, fluid surrounding and inflammatory signs of the mesenteric fatty (1) (image B). The native pancreas was normal (image D).

## DISCUSSION

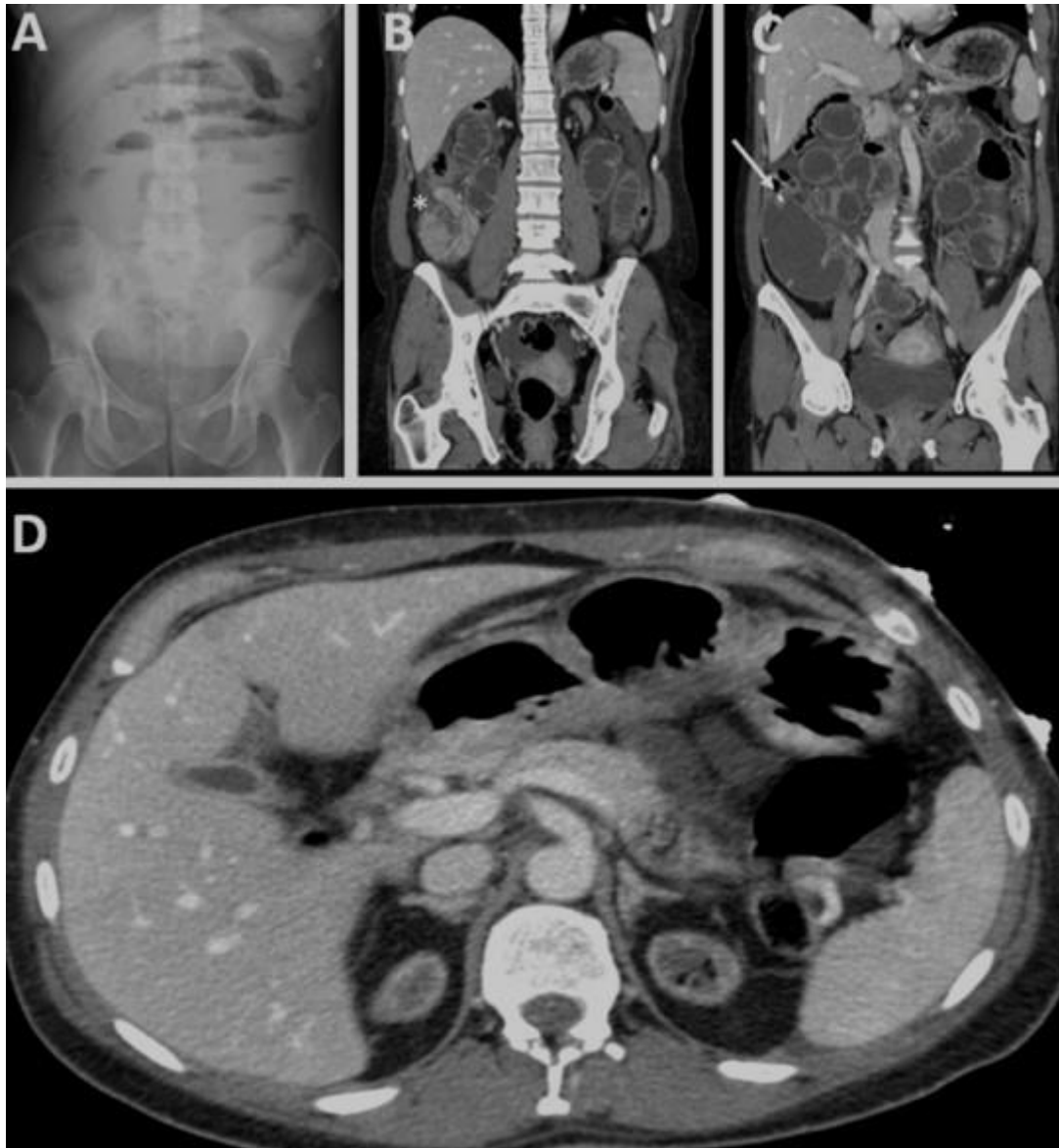
Two different radiographic findings could explain the abdominal pain of the patient:

1. Intestinal obstruction with an ileocaecal transition zone, probably due to adhesions (image C).
2. Findings suggestive of pancreatitis of the pancreatic graft. These findings are more important in the head of the transpant, with parenchymal edema and free fluid surrounding (Image B).

An urgent exploratory laparotomy was carried out. Many adhesions which could cause the obstructive problem were observed and removed. The patient evolved favourably, disappearing the obstructive problem and lowering the amylase levels.

## CONCLUSION

An obstructive problem for adhesions should be suspected when a CT with no apparent cause appear in patients with surgical record. The pancreatitis of the pancreas graft is an unusual complication, being responsible, sometimes, the cause of a graft rejection (2).



*A) Plain abdominal radiography shows air/water levels suggestive of intestinal obstruction B) Edema in the pancreatic graft head (asterisk) C) Dilation of the small bowel with a transition zone on the ileocaecal region (arrow). D) Native normal pancreas.*

#### **BIBLIOGRAPHY**

- Tolat PP, Foley WD, Johnson C, Hohenwarter MD, Quiroz FA. Pancreas Transplant Imaging: How I Do It. Radiology. 2015; 275:14-27.
- Redfield RR, Kaufman DB, Odorico JS. Diagnosis and Treatment of Pancreas Rejection. Curr Transpl Rep. 2015; 2:169–175.