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Steroid-responsive pancreatitides

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Abstract

Autoimmune pancreatitis has received considerable attention especially due to the dramatic effect of corticosteroid therapy on its clinical course. Knowledge, especially regarding on type 1 autoimmune pancreatitis, has significantly increased over the last decades, and despite significant differences in pathophysiology and outcomes, both type 1 and 2 autoimmune pancreatitis are still considered different types of the same disease. Some have proposed a different nomenclature reflecting

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Current Concepts in the Treatment of **Autoimmune Pancreatitis** **Suresh T Chari** Division of **Gastroenterology** and Hepatology, Department of **Internal Medicine**, Mayo Clinic College of Medicine. Rochester, MN, USA **Summary Autoimmune pancreatitis** is a recently described chronic inflammatory

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Author: Nicolo' de Pretis, Yan Bi, Saurabh Mu...

Publish Year: 2016

Images of Steroid-responsive Pancreatitis

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	Autoimmune Pancreatitis	Pancreatic Cancer
Features	Not useful Elevated serum IgG4 level (> 140 mg/dL) (86% sensitive, 96% specific, 91% accurate) Capsule-like low-density rim, delayed enhancement of the pancreas, and no atrophy of the body and tail of	Not useful Elevated serum cancer antigen 19-9 level Low-density mass, abrupt pancreatic duct cutoff, distal pancreas atrophy, regional spread, and m

Approach for determining the need for FNA to rule out type 1 AIP according to ICDC.		
Strength of collateral evidence*	FNA recommendation	
Any**	No	



Steroid-responsive pancreatitides



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Author: Tawee Tanvetyanon, Patrick J. Stiff

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