



Abdominal X-Ray in a Diabetic Patient with Episodic Abdominal Pain

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Clinical Image

A 49-year-old man was referred to us from diabetic clinic for evaluation of episodic epigastric pain. Patient was diagnosed as having diabetes at age 44 years and was started on oral hypoglycemics (metformin and glimepiride).

Epigastric pain was episodic, aching type, especially after heavy meal and radiates to back. There was no history of nausea, vomiting, heartburn and diarrhea. Pain was present since childhood but never evaluated due to episodic nature and mild intensity. He revealed history of similar pain abdomen in her 17-year-old daughter for which she was diagnosed to have chronic calcific pancreatitis. Patient was non-smoker and non-alcoholic. His general and systemic examination was normal.

His standing abdominal X-ray revealed multiple large calculi in pancreatic head region (Figure 1A). His abdominal computed tomography revealed dilated main pancreatic duct with multiple calculi and parenchymal atrophy (Figure 1B) suggestive of chronic calcific pancreatitis etiology? hereditary.

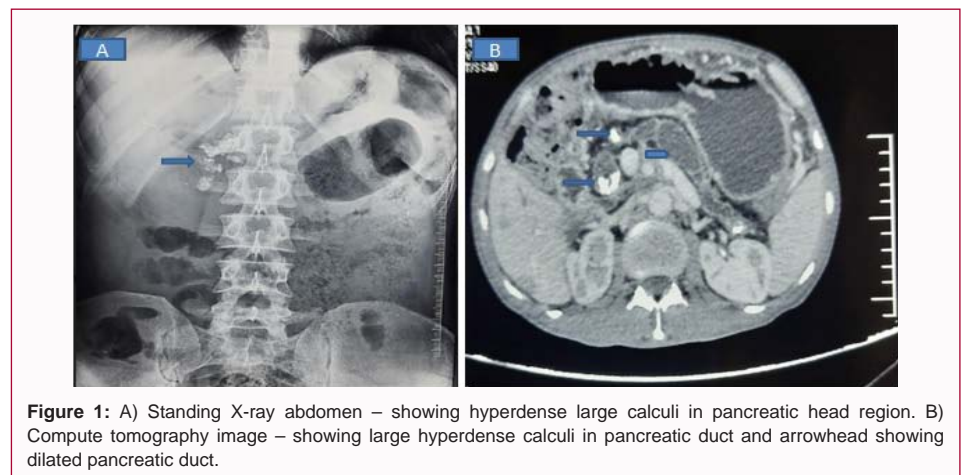


Figure 1: A) Standing X-ray abdomen – showing hyperdense large calculi in pancreatic head region. B) Compute tomography image – showing large hyperdense calculi in pancreatic duct and arrowhead showing dilated pancreatic duct.

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