

### BILIARY-TRACT DIAGNOSIS BY MAGNETIC RESONANCE IMAGING

A 54-year-old man had a 1-year history of variable epigastric pain accompanied by recent mild jaundice. Initial ultrasonography at a community hospital suggested a mass, which was possibly malignant, in the head of the pancreas. Abdominal computed tomography (Figs. 1 and 2) and repeat ultrasonography (Fig. 3) revealed a tubular structure (white arrows on Figs. 1, 2 and 3) in the expected region of the common duct,

extending into the right lobe of the liver and containing fluid and debris that was thought to represent a markedly dilated extrahepatic biliary system. The wall of this structure was thickened (Fig. 3, arrow). In addition, a fluid collection, which was thought to represent a pancreatic pseudocyst, was present in the lesser sac (Fig. 2, black arrow). Endoscopic retrograde cholangiopancreatography failed to demonstrate the com-

mon bile duct. Magnetic resonance imaging (Fig. 4, GB = gallbladder, DUO = duodenum) without contrast resolved the question by demonstrating a displaced duct of normal calibre (Fig. 4, black arrows). The tubular collection identified on ultrasonography and computed tomography actually represented a second pancreatic pseudocyst, which concealed the common duct on the other studies.

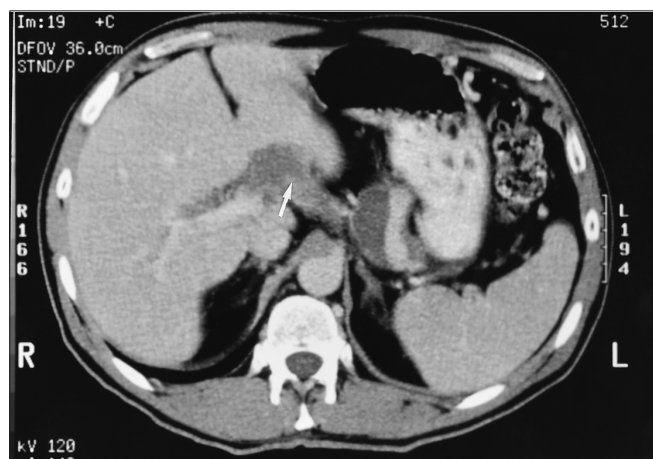


FIG. 1

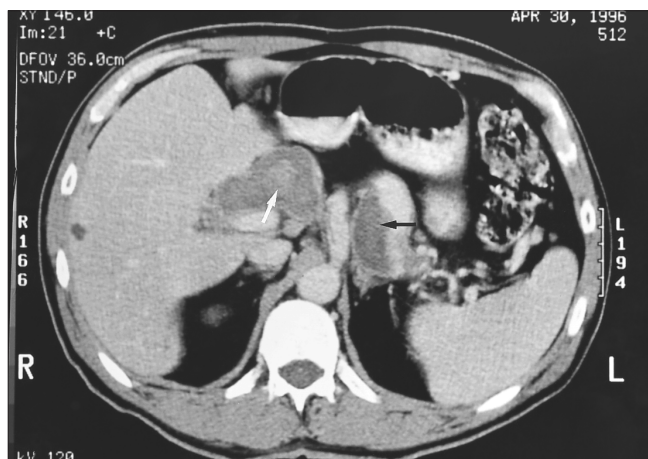


FIG. 2

Section Managers: David P. Girvan, MD, FRCSC and Nis Schmidt, MD, FRCSC

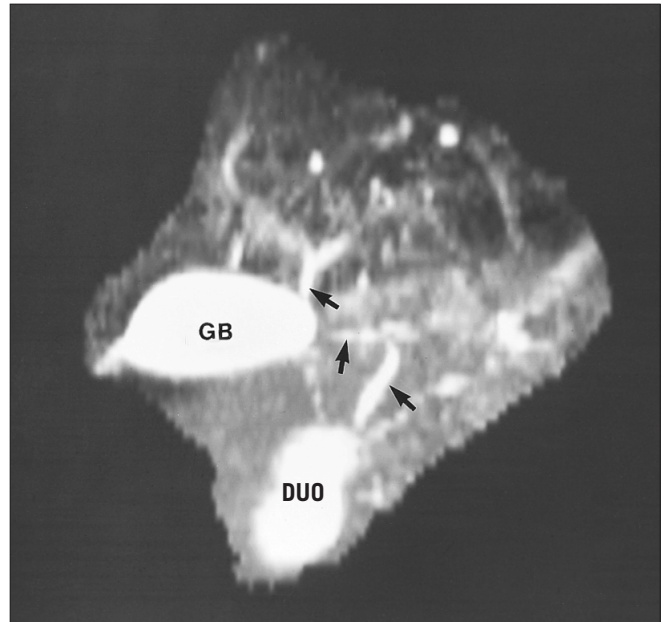
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**FIG. 3**



**FIG. 4**

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