Medical Image of the Week: Pancreatic Abscess

Figure 1. CT scan of the abdomen showing fluid collections (arrows).

Figure 2. Ultrasound of the abdomen showing a distended pancreatic duct, which communicates to an inferior fluid collection, likely a pseudo-cyst.
A 55 year old woman, with a history of alcohol abuse and necrotizing pancreatitis, was readmitted for worsening abdominal pain and acute respiratory failure. A CT scan of the abdomen and pelvis showed an atrophic pancreas and multiple fluid collections. Along the inferior surface of the pancreas, there is a fluid collection with an evolving loculated rim, which is asymmetric, the larger component measure 2.9 cm x 4.7 cm (Figure 1, large arrow). Anterior to the body of the pancreas, there is an additional 2.2 cm x 2.4 cm with evolving loculated rim (Figure 1, short arrow), both compatible with a pseudocyst. Ultrasound of the abdomen showed a distended pancreatic duct that communicates to the smaller fluid collection (Figure 2). Coronal CT of the abdomen and pelvis showed a 12.4 cm pelvic abscess (Figure 3). CT guided drainage of the pelvic abscess was performed with positive culture of the fluid for *E. coli*. She developed secondary peritonitis and had a successful exploratory laparotomy.

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