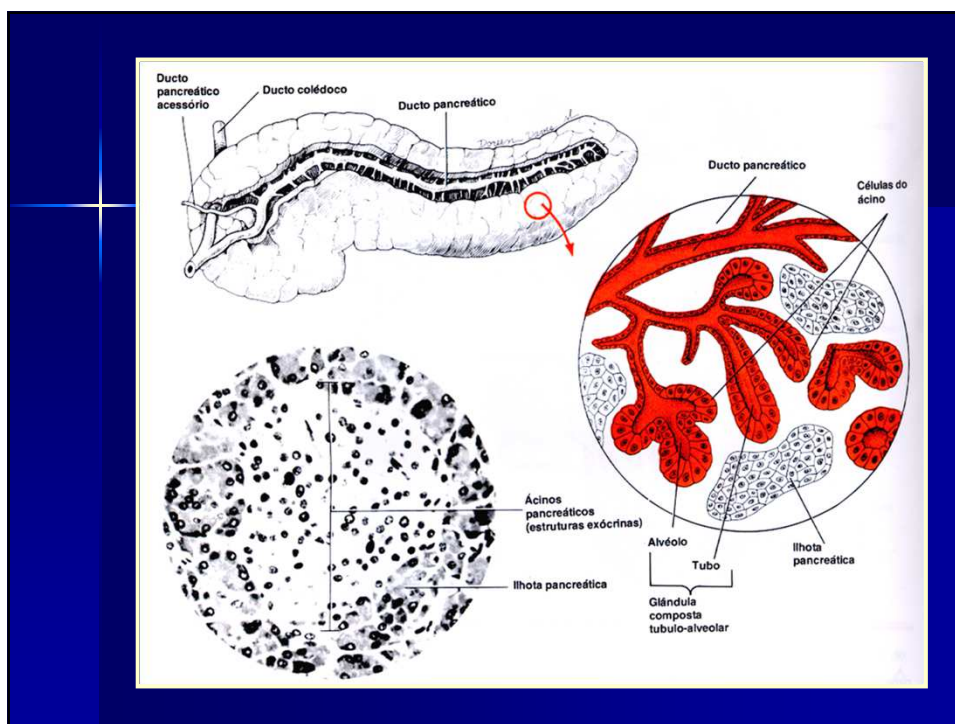
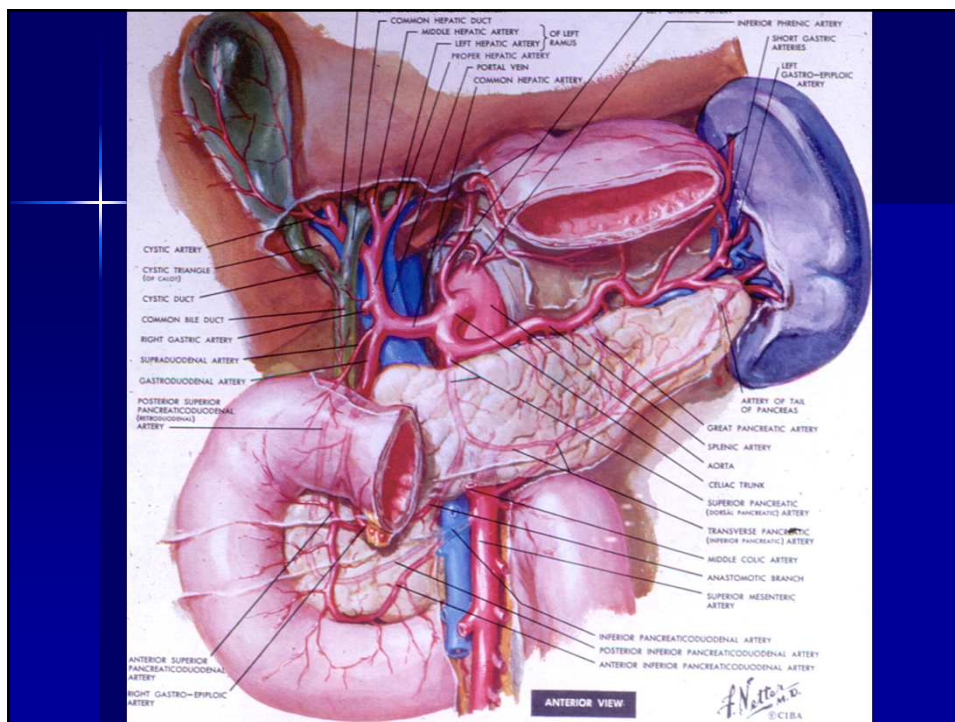


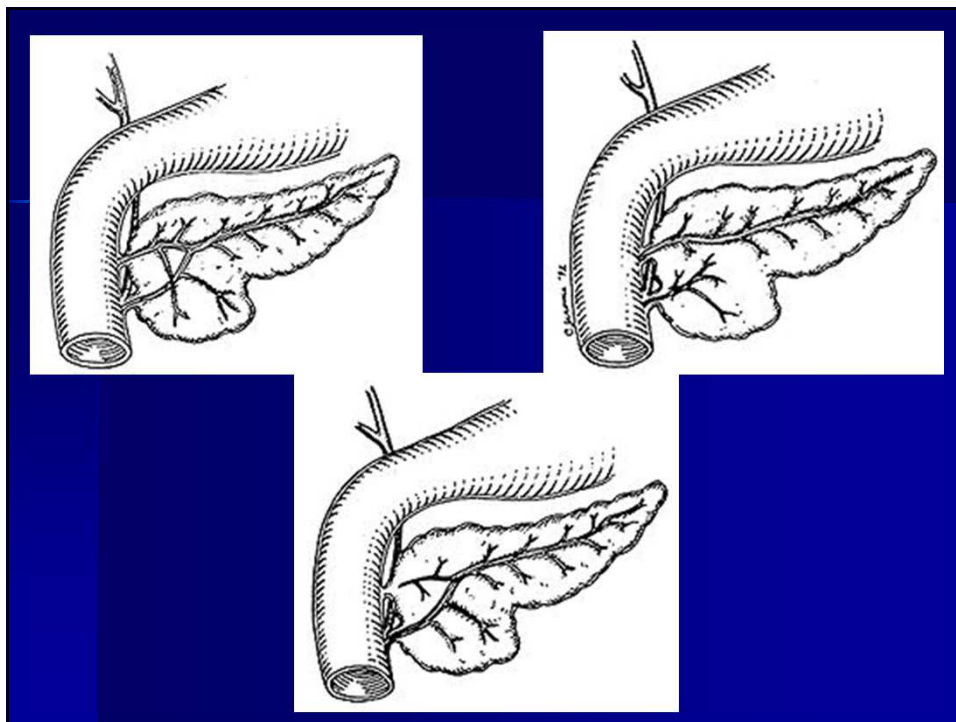
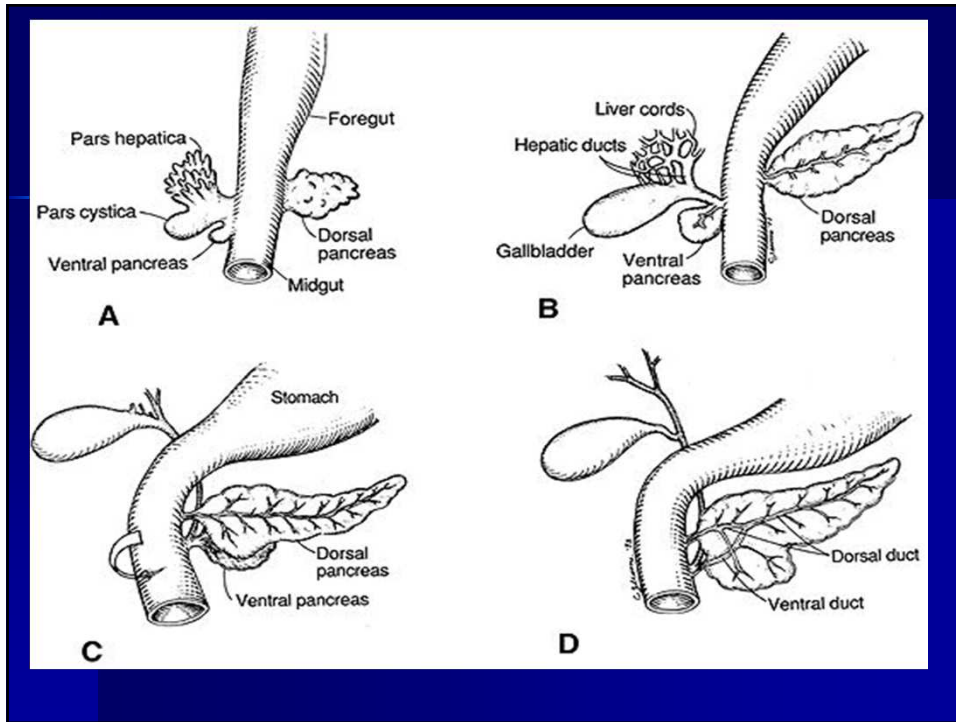
Pâncreas, vesícula e vias biliares

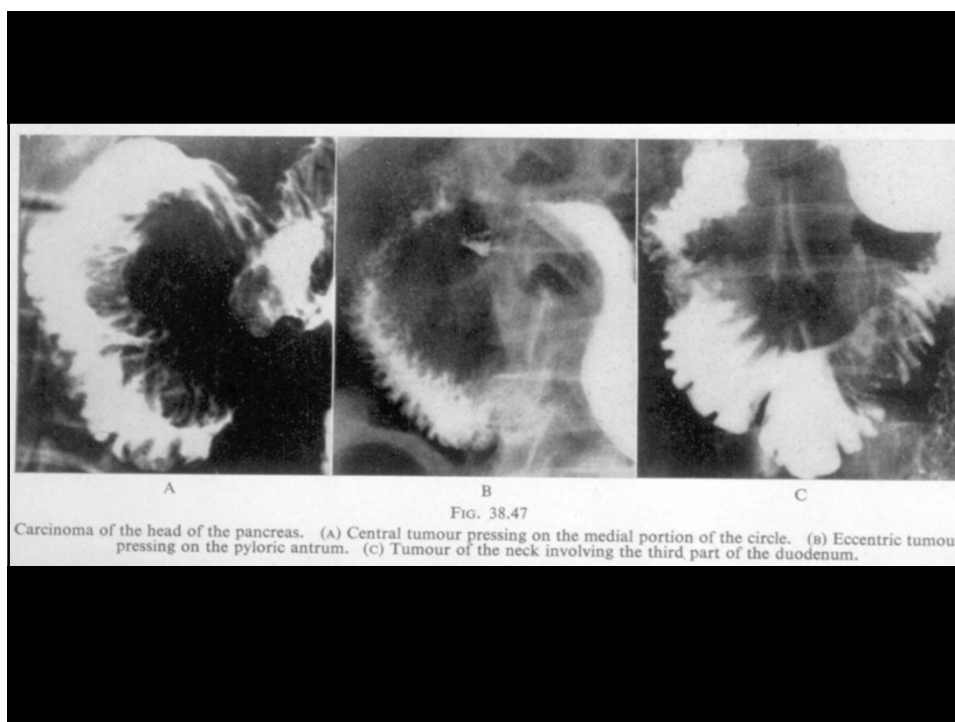
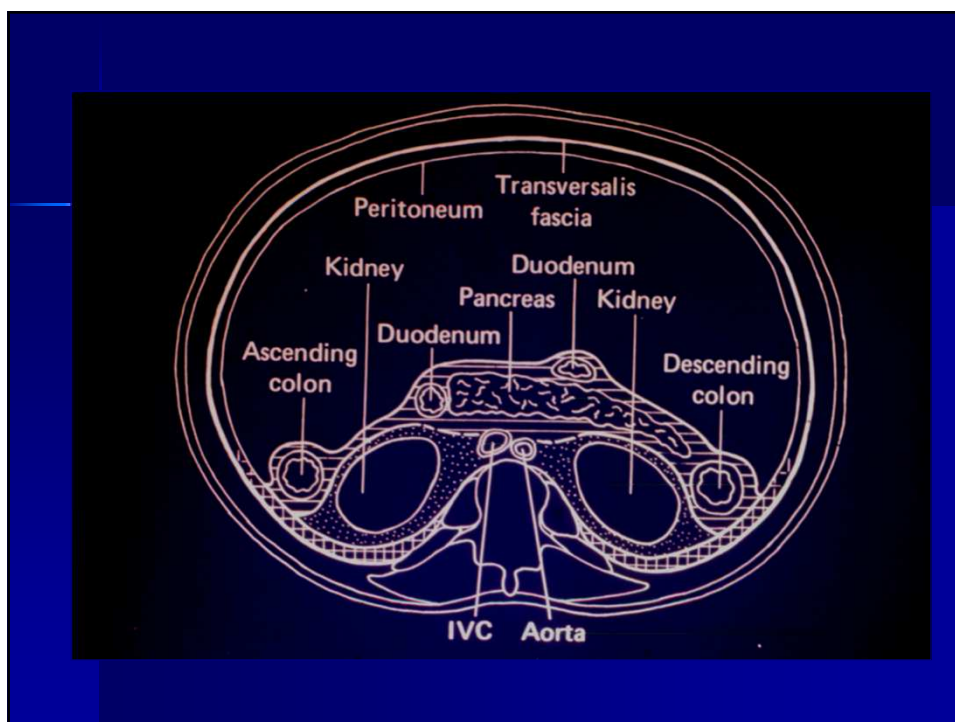
Prof. Jorge Elias Júnior

Pâncreas

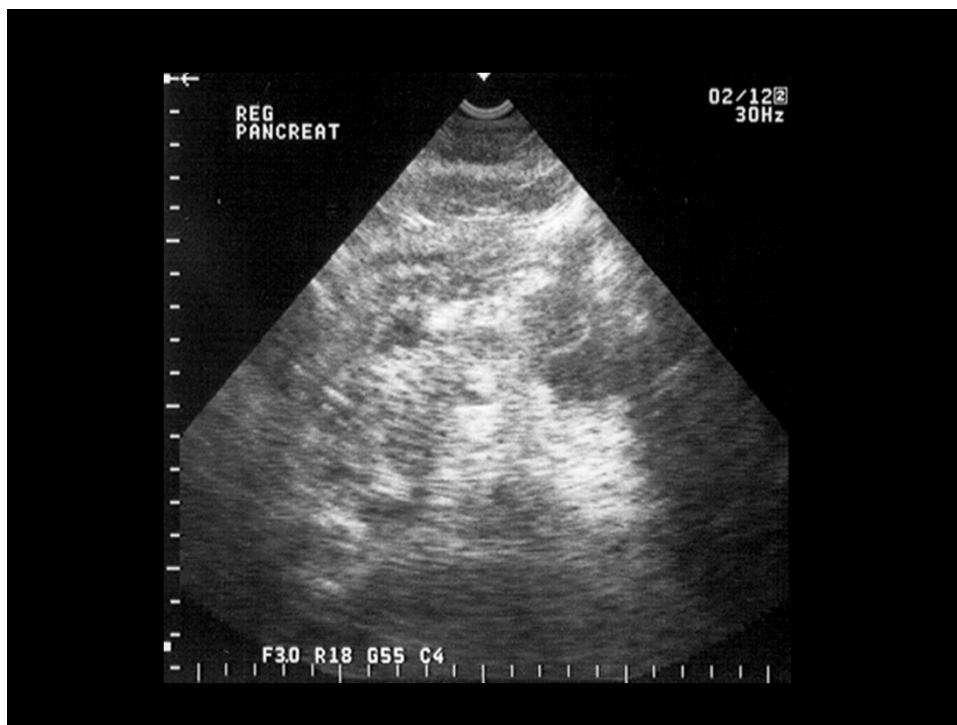
- Glândula mista, endócrina e exócrina, sendo que a porção exócrina secreta o suco pancreático que é transportado para o duodeno através do ducto pancreático
- Suco pancreático:
 - Pepsina
 - Amilase
 - Lipase
 - ...

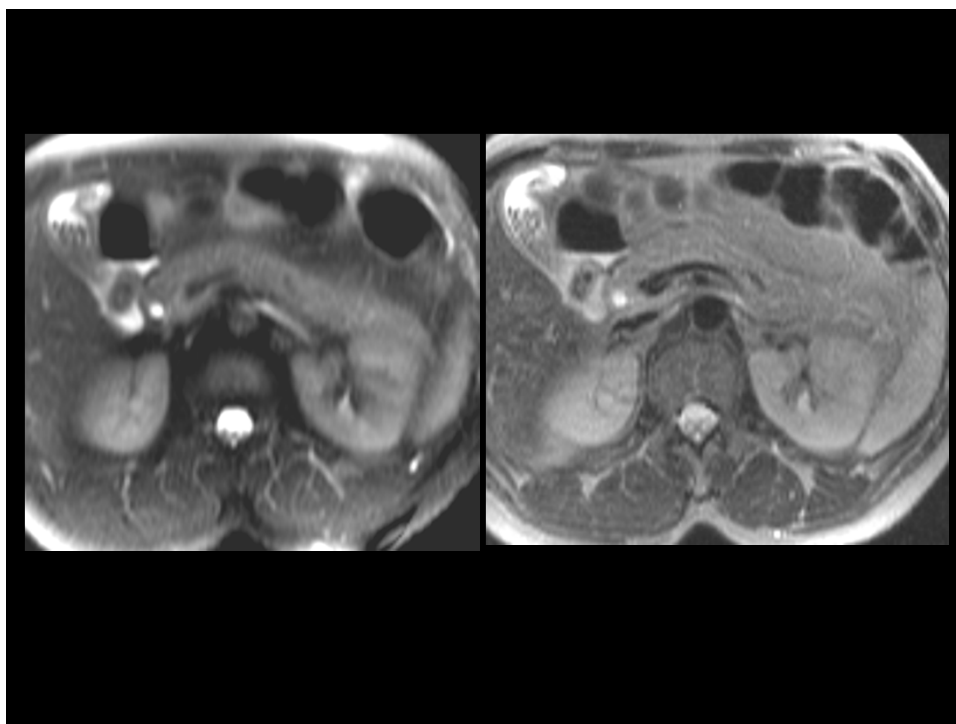
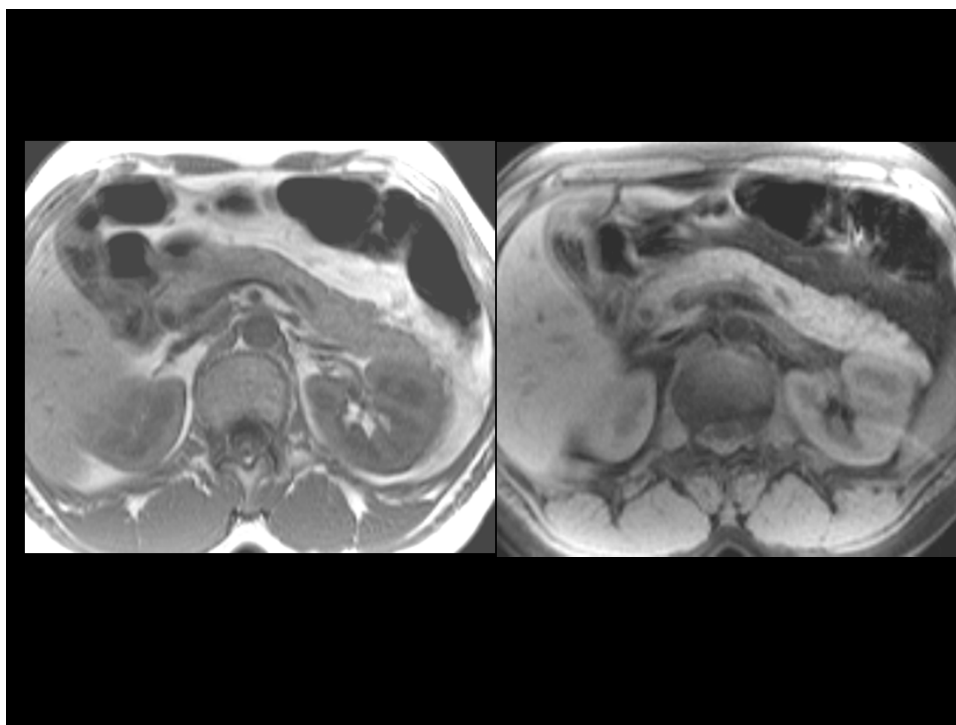


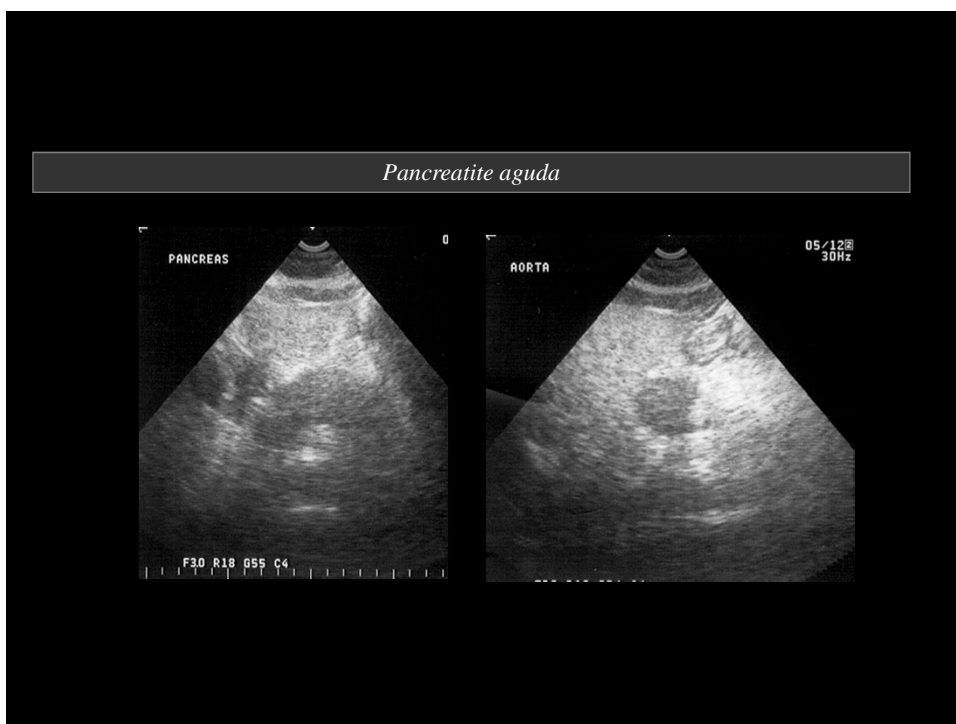
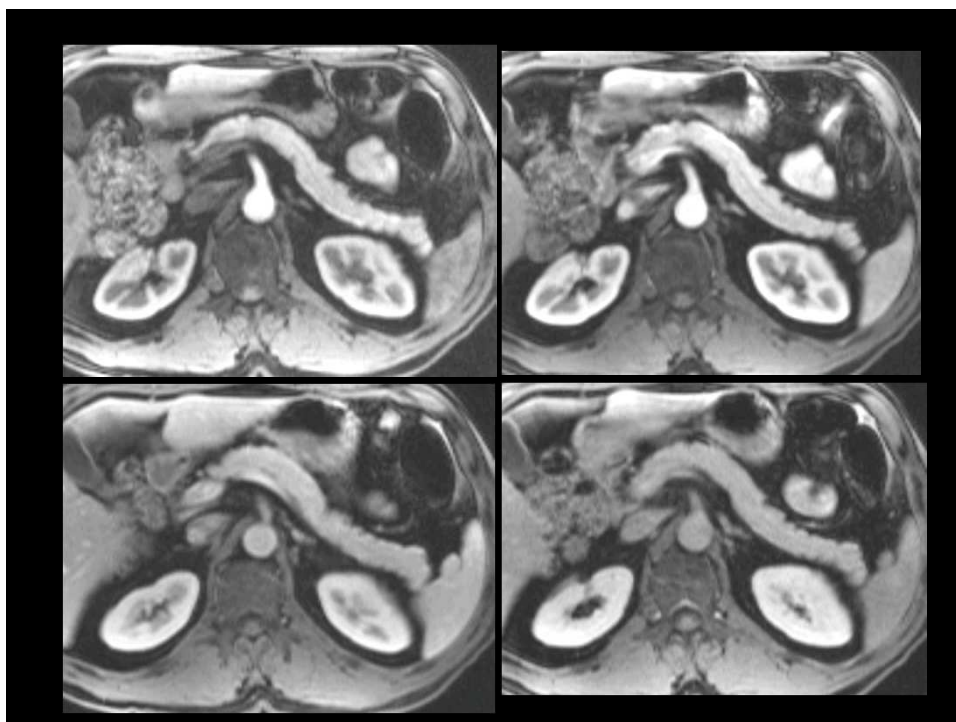












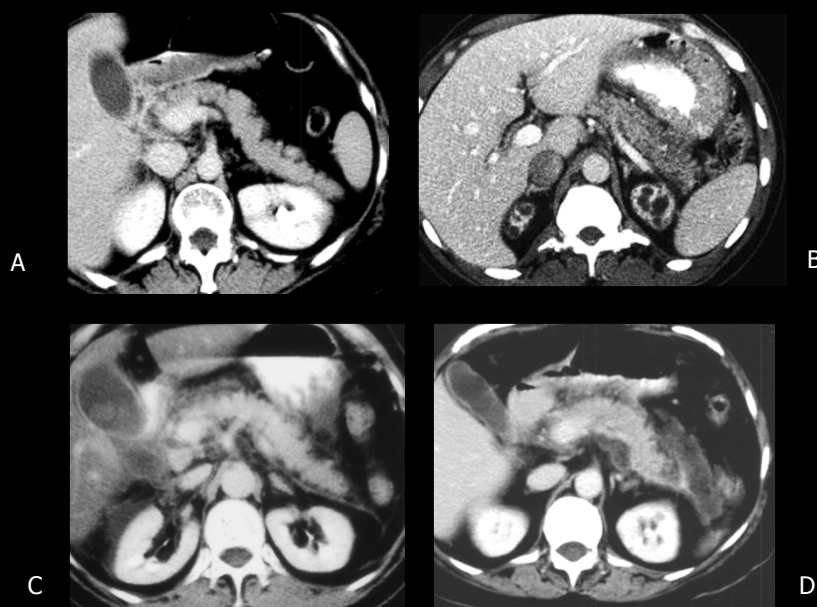
Estratificação da gravidade pela TC

Balthazar et al., 1990. Radiology 174:331

PROCESSO INFLAMATÓRIO		Índice morfológico
Grau A	Pâncreas normal	0
Grau B	Aumento focal ou difuso do pâncreas	1
Grau C	Alterações pancreáticas associadas a inflamação peri-pancreática	2
Grau D	Coleção líquida em apenas uma localização	3
Grau E	Duas ou mais coleções e/ou presença de gás em topografia pancreática ou peri-pancreática	4
NECROSE PANCREÁTICA		Índice de necrose
Ausência	Reforço pancreático uniforme	0
< 30%	Área de ausência de reforço menor que 30% da glândula	2
30 – 50%	Área entre 30 a 50% de necrose	4
> 50%	Mais de 50% de necrose	6

Índice de gravidade total = Índice morfológico + índice de necrose

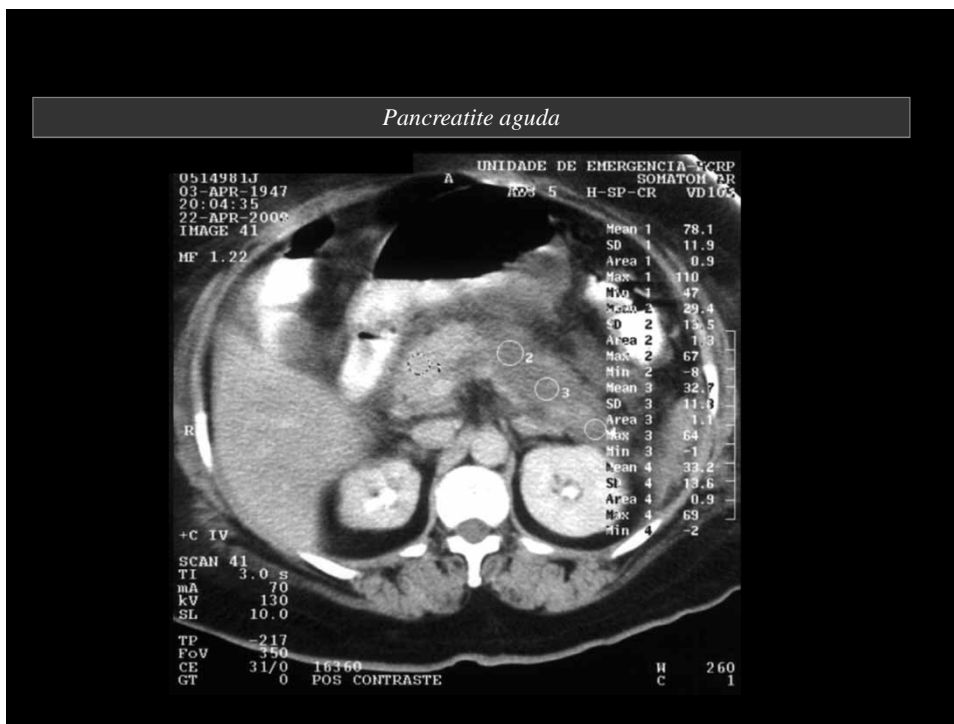
Pancreatite aguda



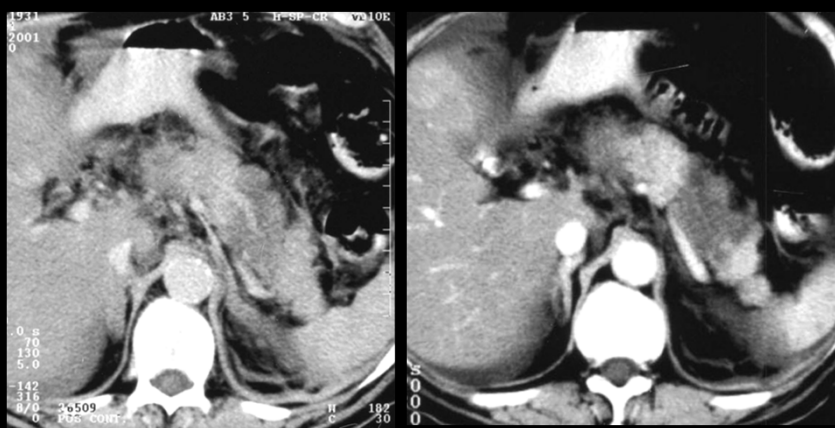
Pancreatite aguda



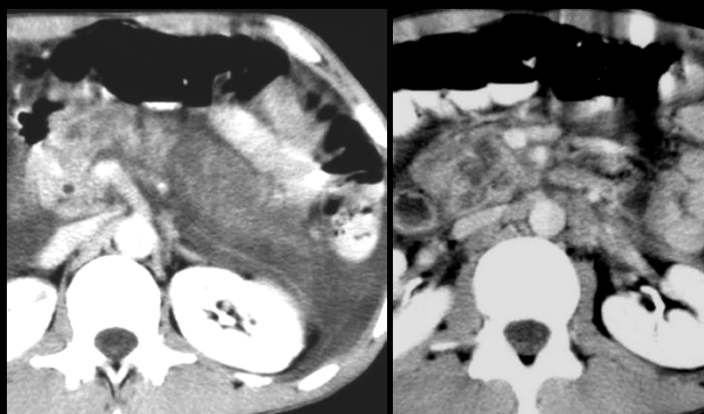
Pancreatite aguda



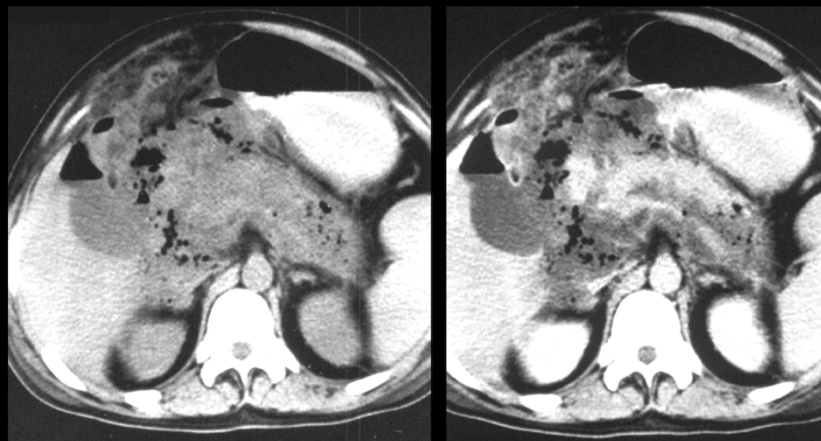
Pancreatite aguda
Necrose < 30%



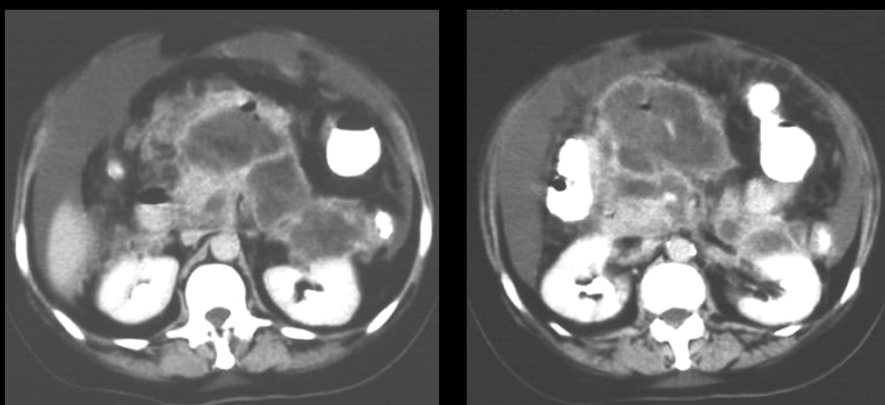
Pancreatite aguda
Necrose > 50%



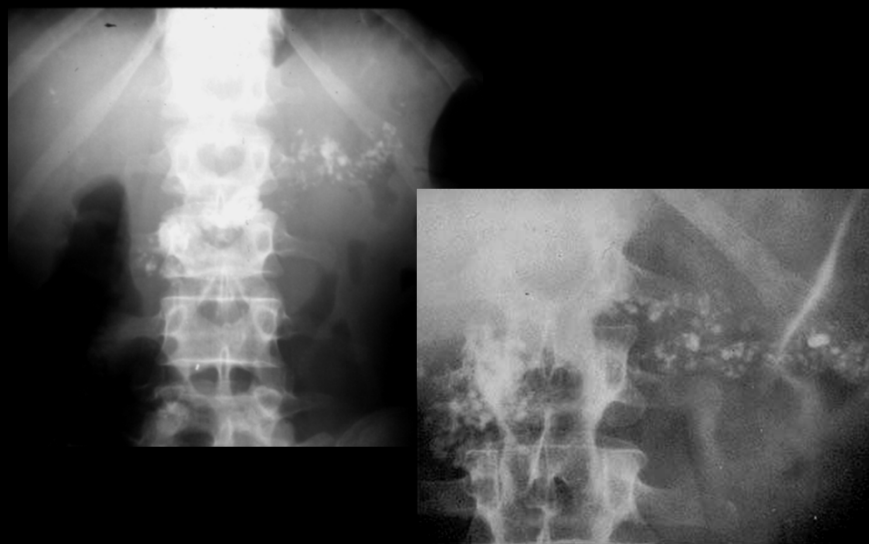
Pancreatite aguda infectada



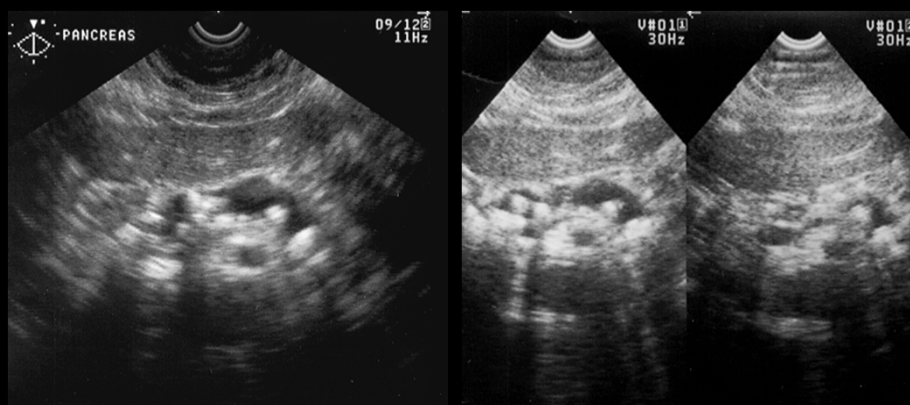
Pancreatite aguda infectada - abscesso

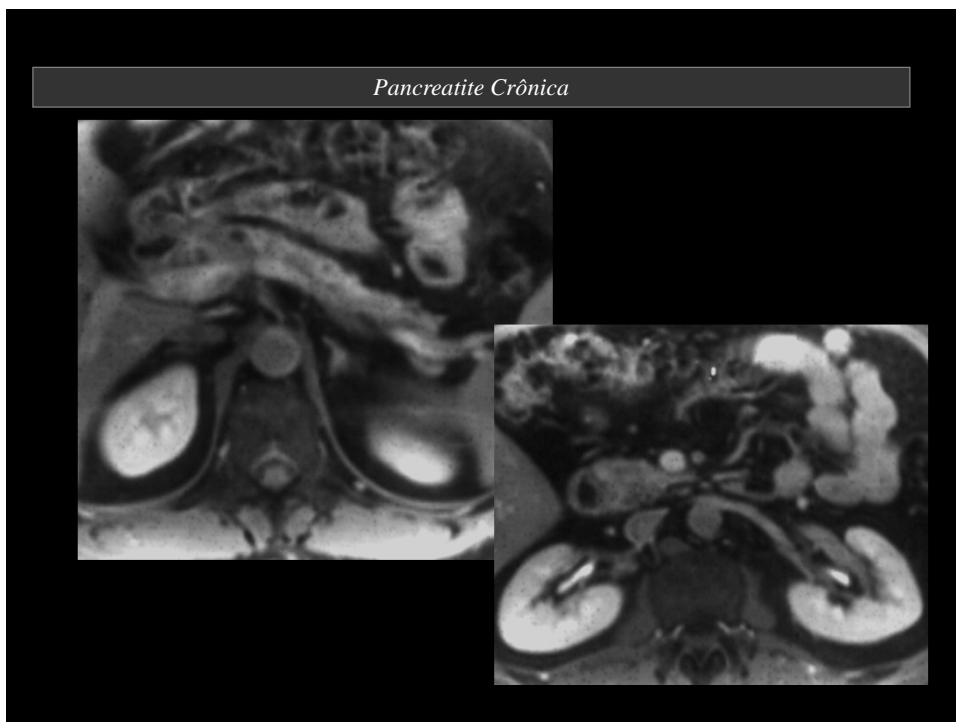
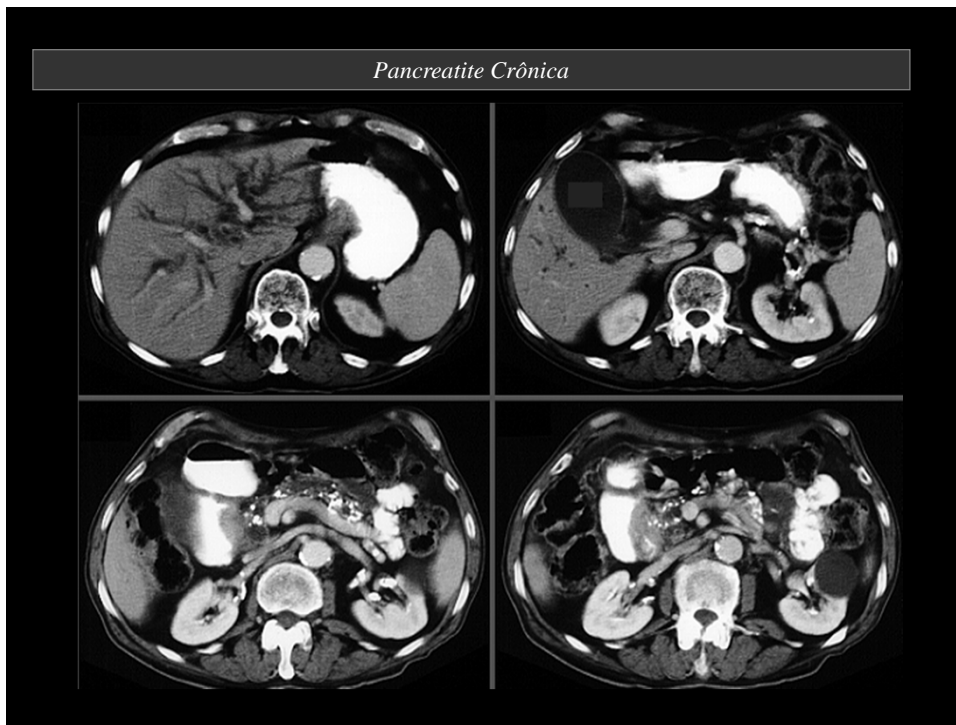


Pancreatite Crônica

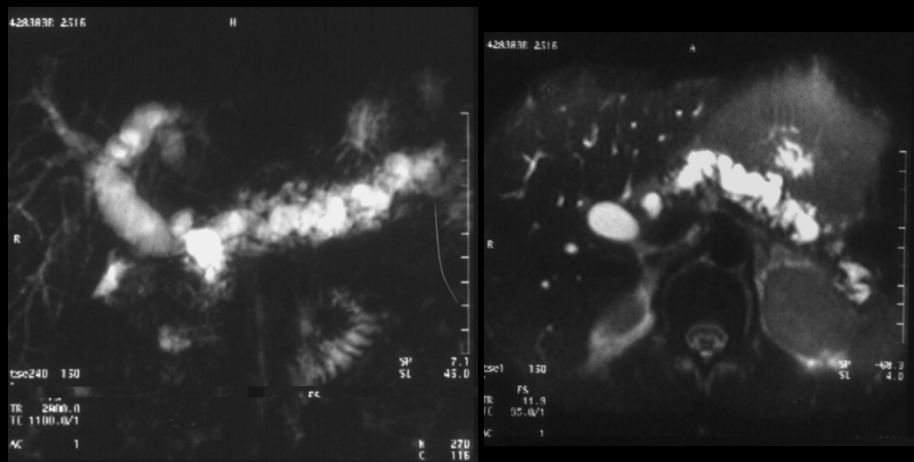


Pancreatite Crônica





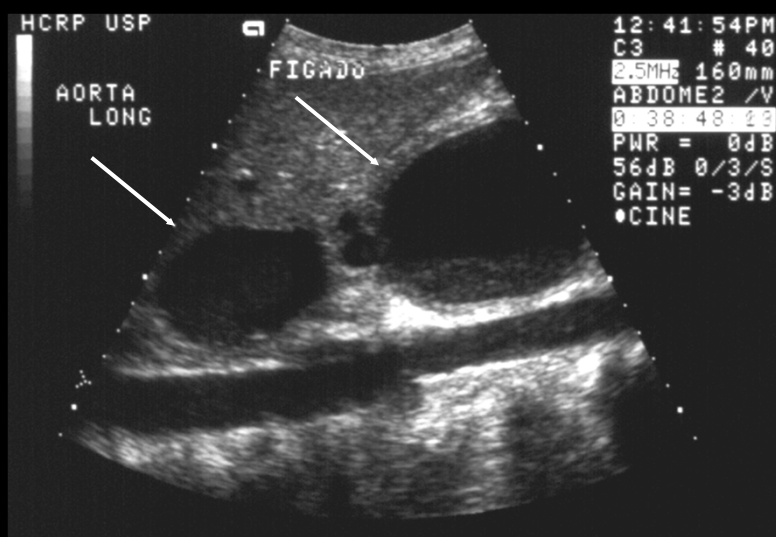
Pancreatite Crônica



Pancreatite Crônica inicial / Pancreatografia



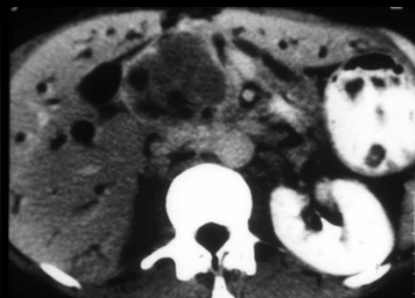
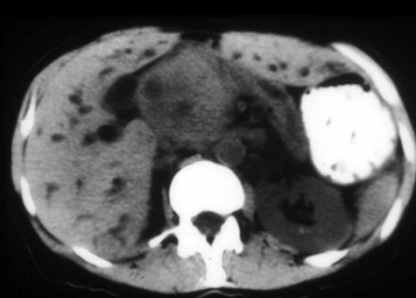
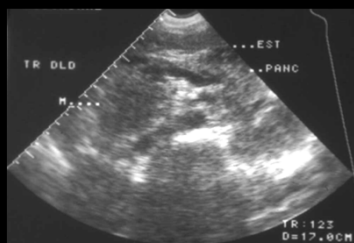
Pseudocisto de pâncreas



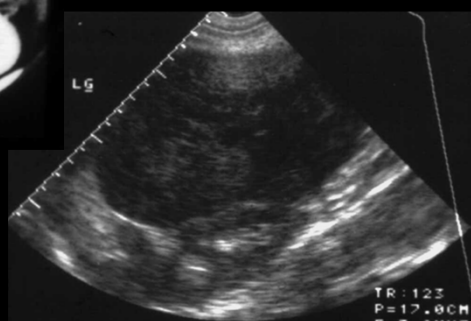
Pseudocisto de pâncreas

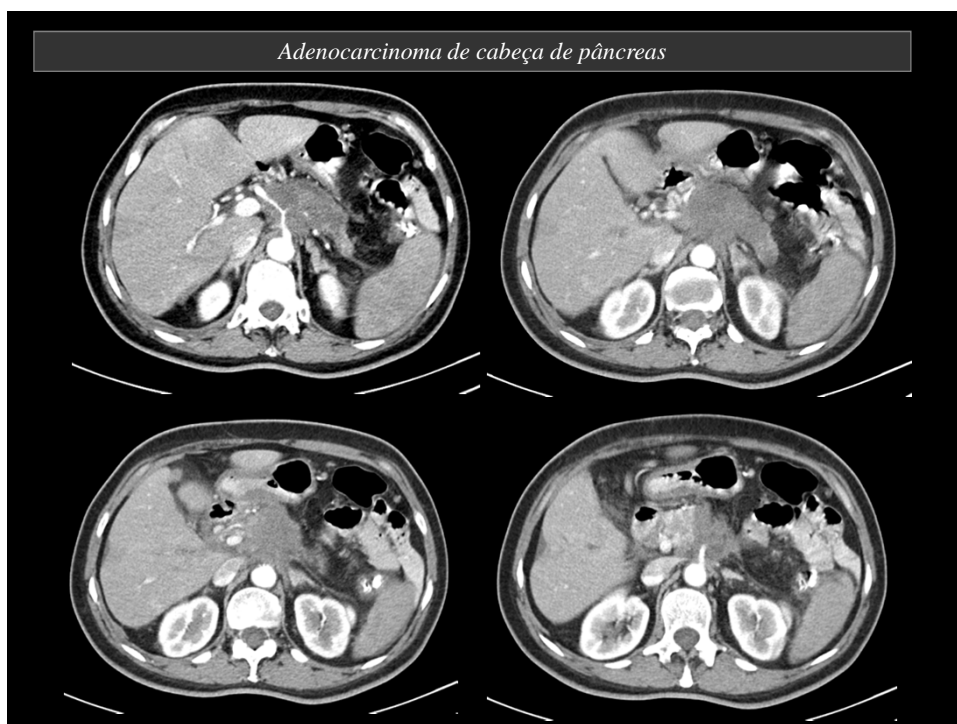
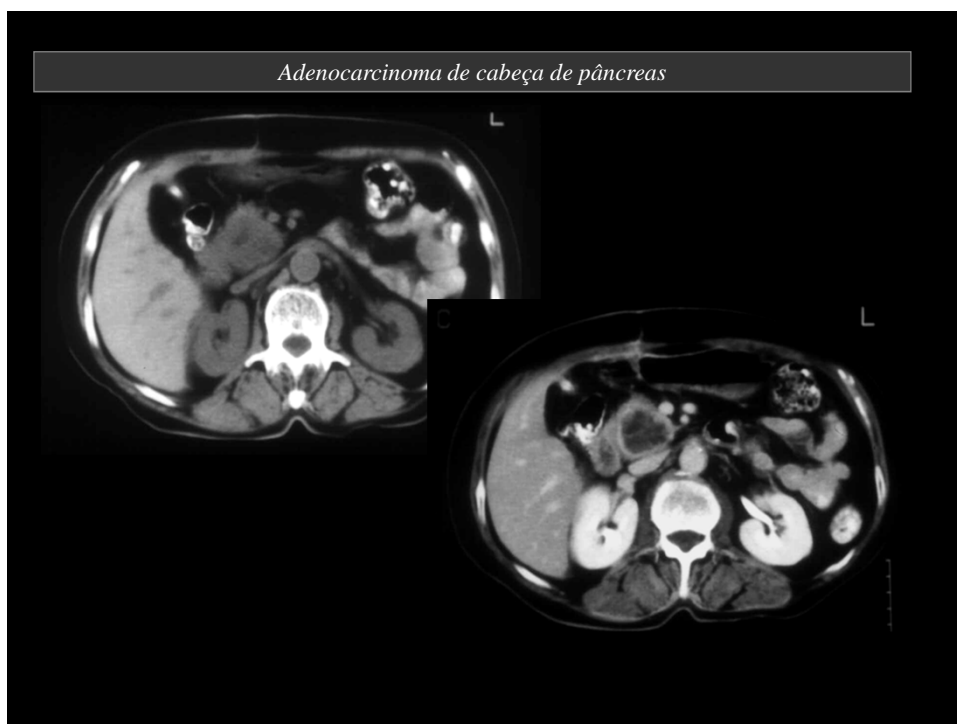


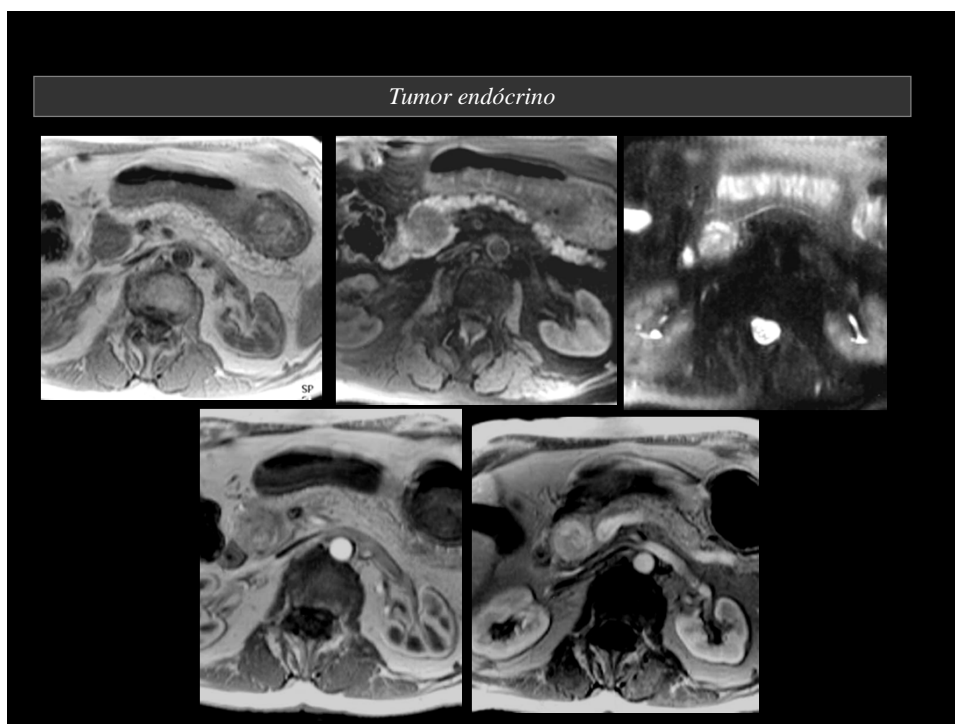
Adenocarcinoma de cabeça de pâncreas



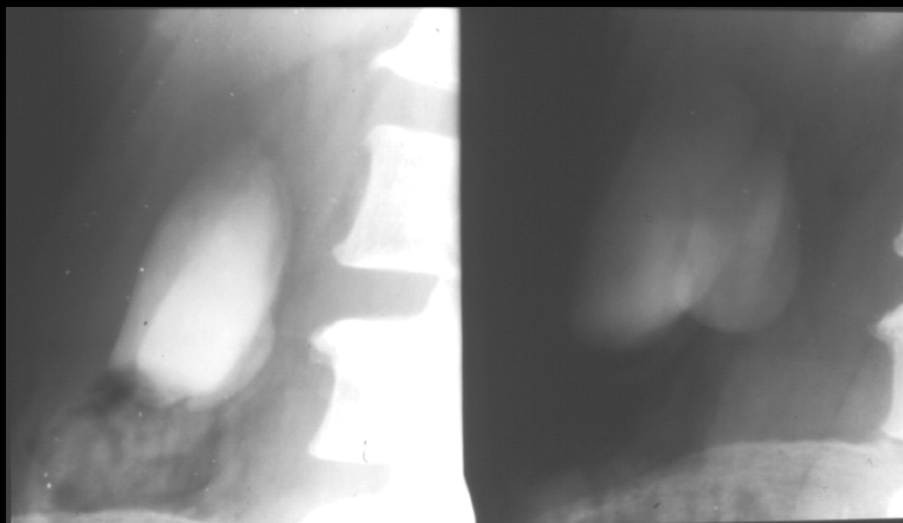
Neoplasia de pâncreas







Colecistograma oral



Ultra-sonografia



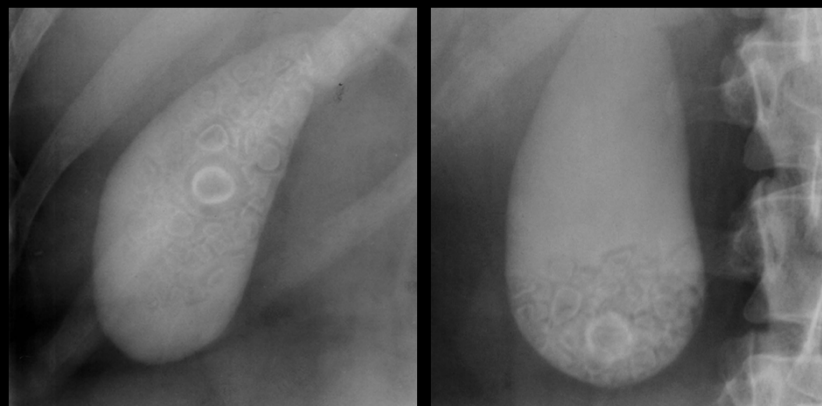
Ultra-sonografia



Colangiografia por RM



Cálculos vesiculares – colecistograma oral



Cálculo vesicular – ultra-sonografía



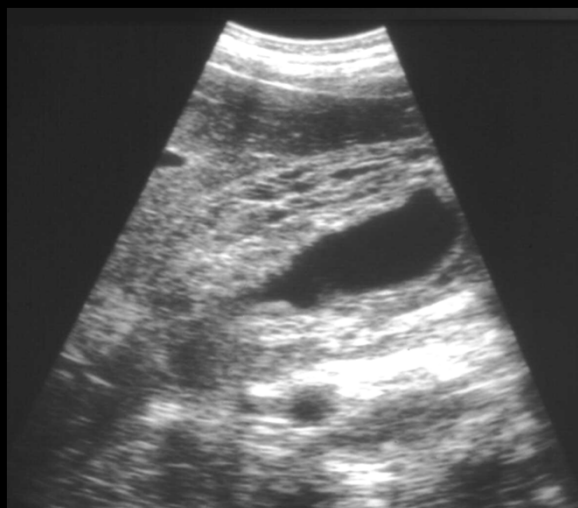
Cálculos vesiculares – ultra-sonografía



Cálculos vesiculares – ultra-sonografía



Espessamento da parede vesicular – ultra-sonografia



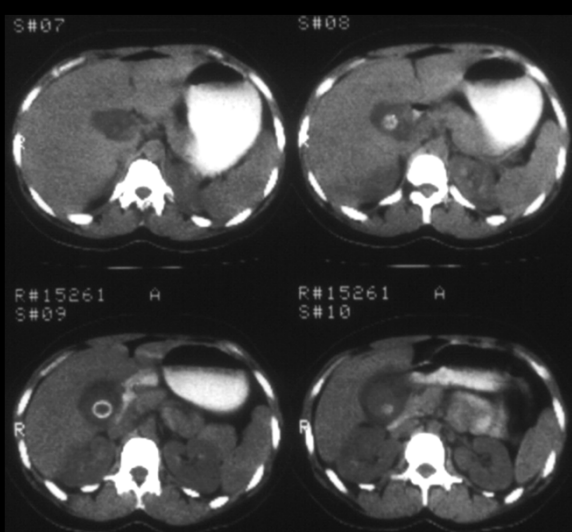
Coleciste aguda calculosa – ultra-sonografia



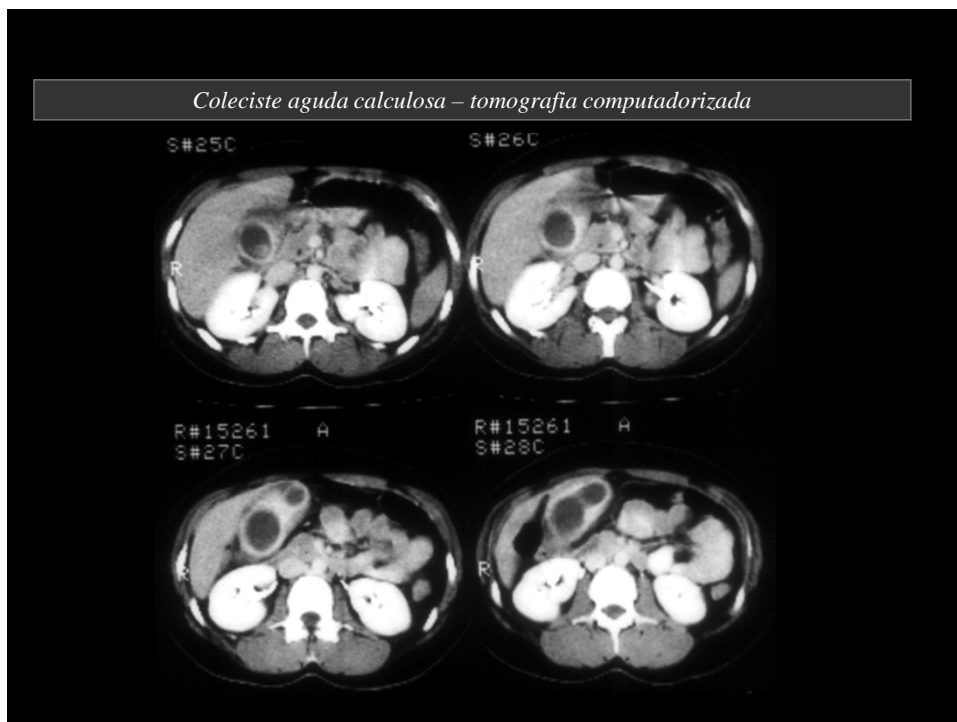
Coleciste aguda calculosa – ultra-sonografia



Coleciste aguda calculosa – tomografia computadorizada

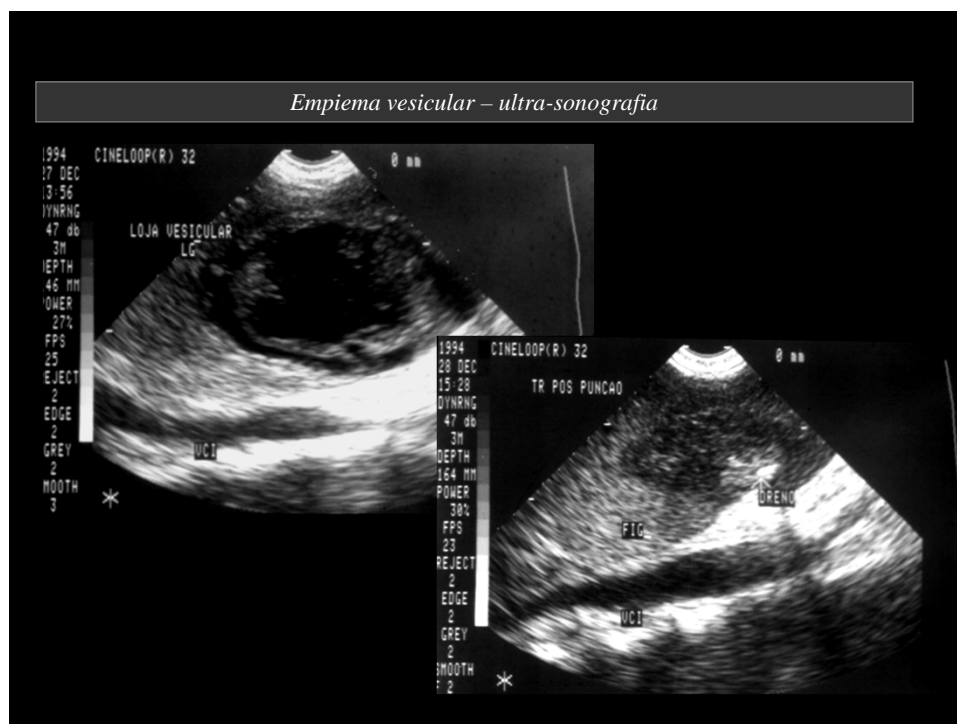


Coleciste aguda calculosa – tomografía computadorizada

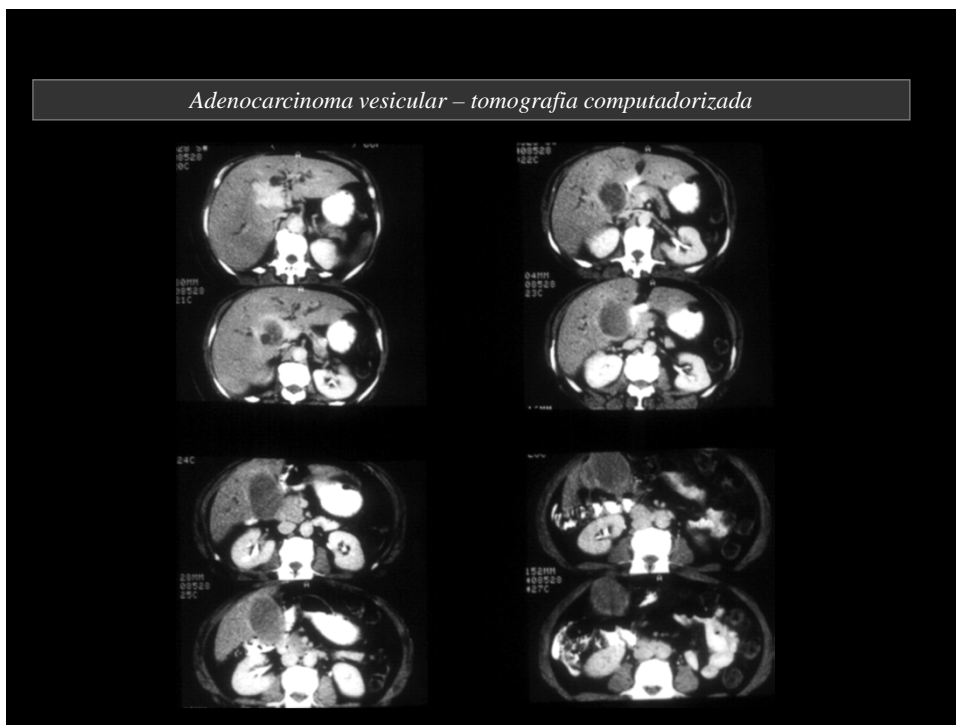


Coleciste aguda enfisematosa – tomografía computadorizada

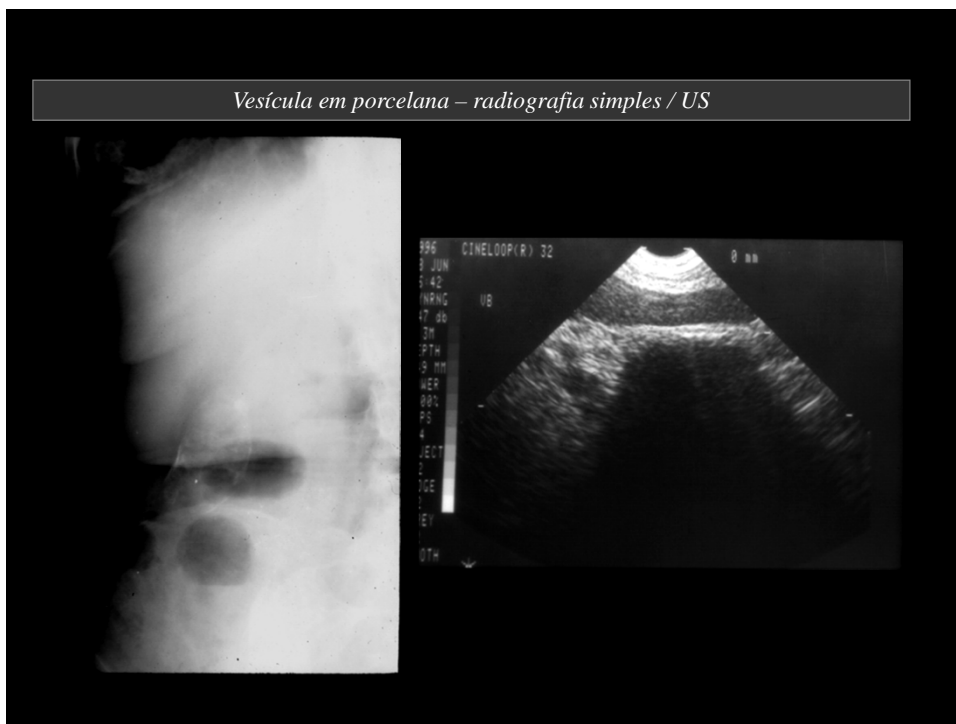


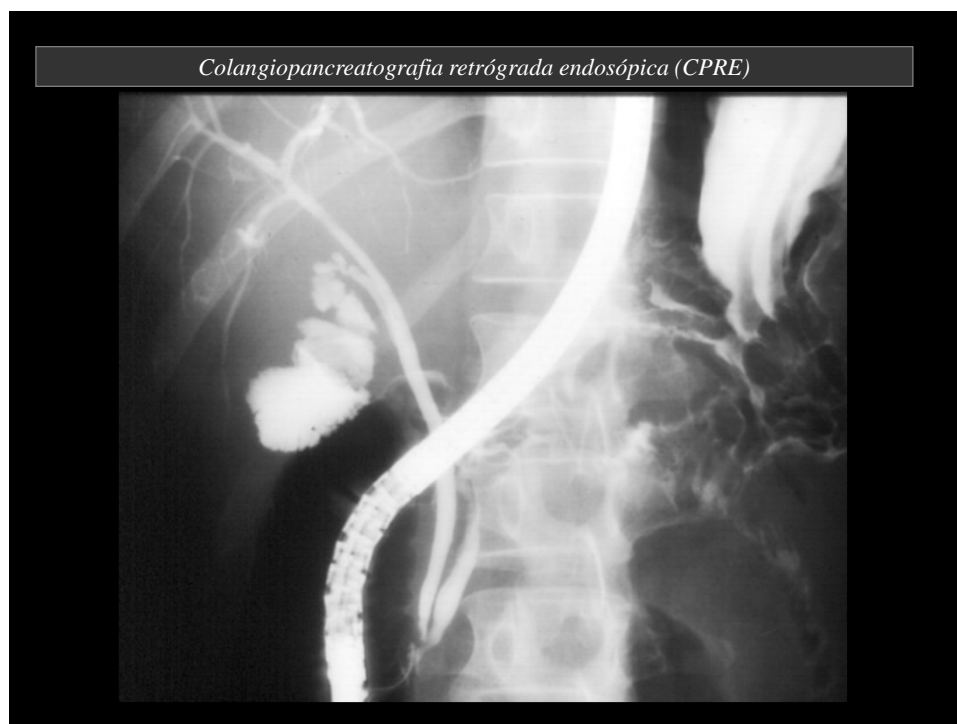
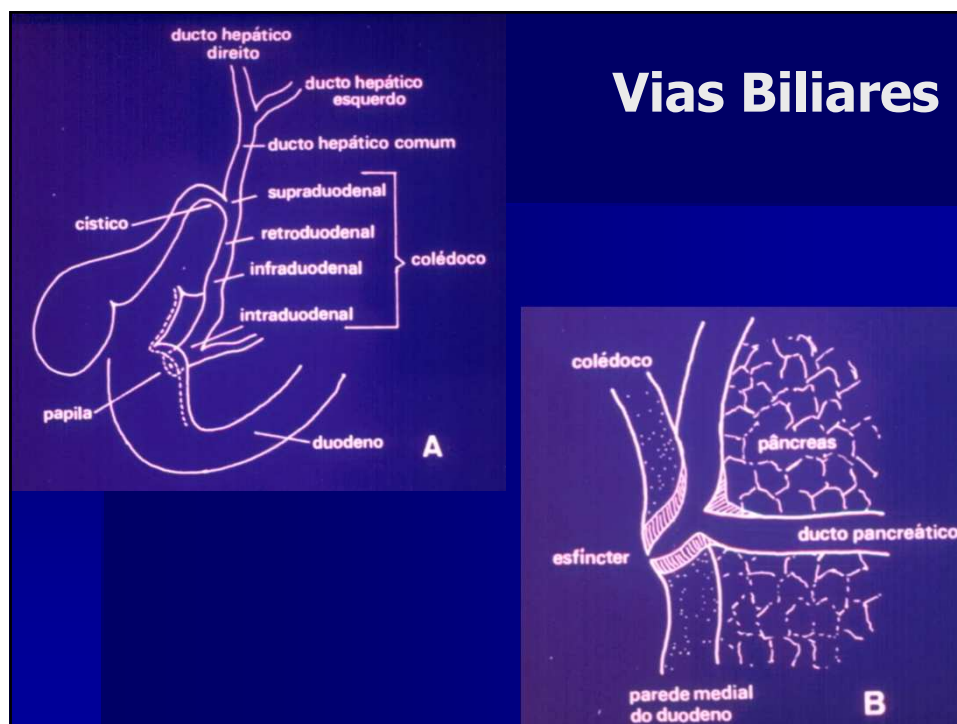


Adenocarcinoma vesicular – tomografia computadorizada

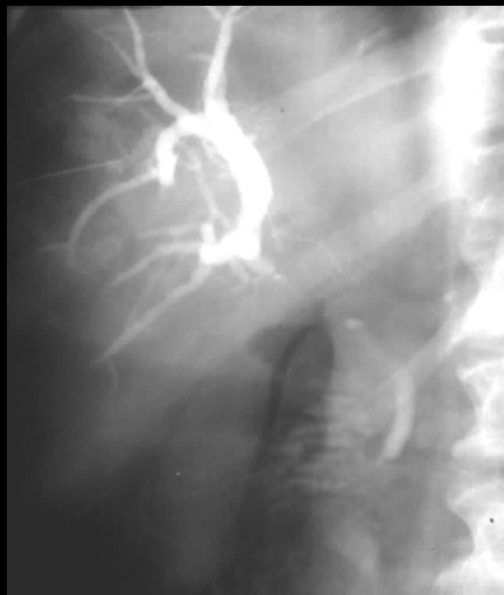


Vesícula em porcelana – radiografia simples / US





Colangiografía transperieto-hepática



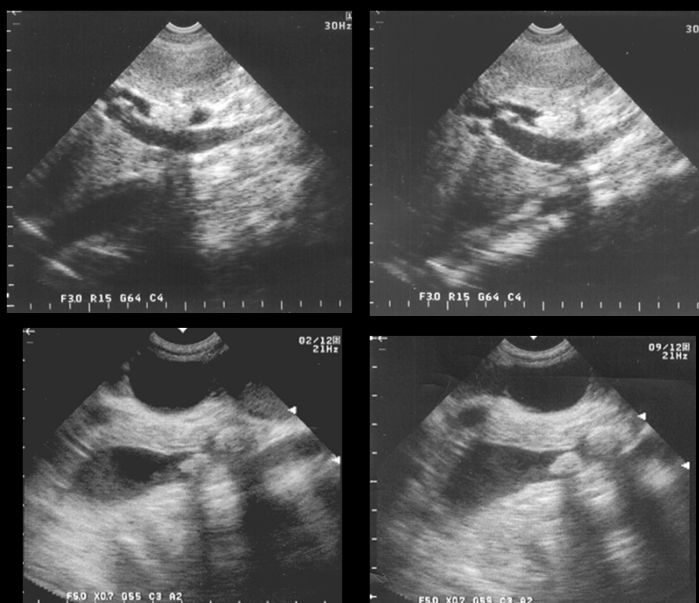
Ultra-sonografía



Tomografía computadorizada



Cálculo biliar – Ultra-sonografía



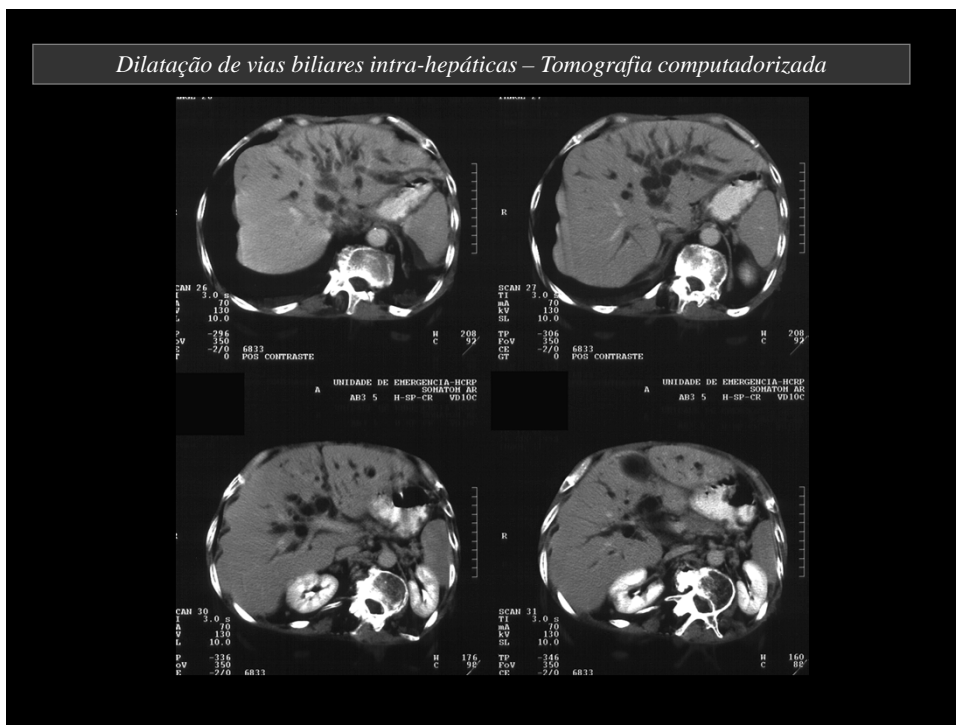
Colangiografia pelo dreno



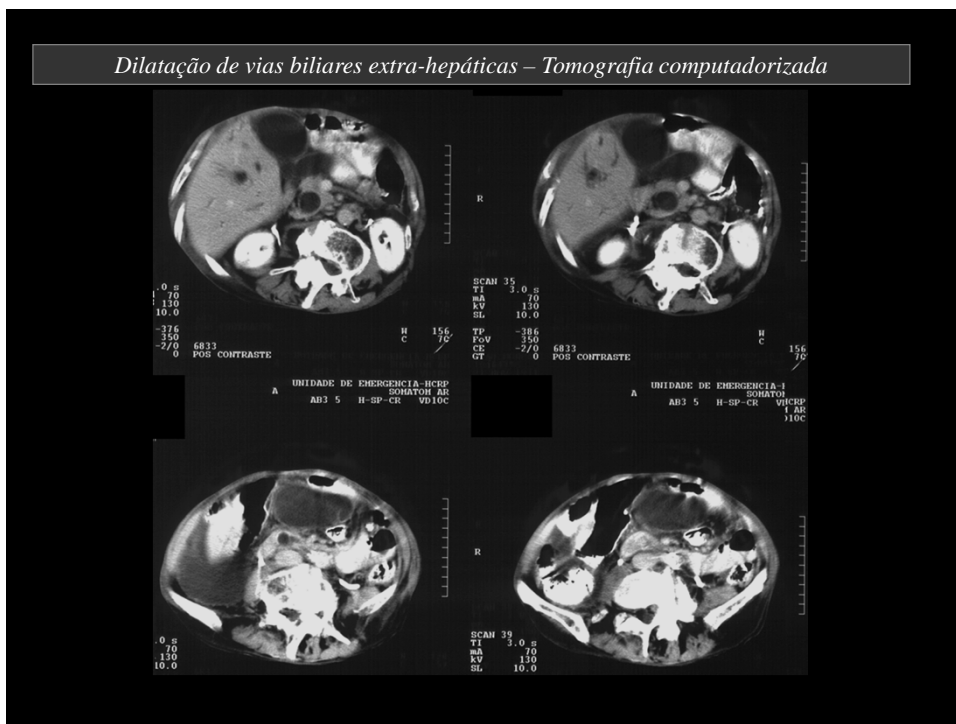
Colangiografia pelo dreno



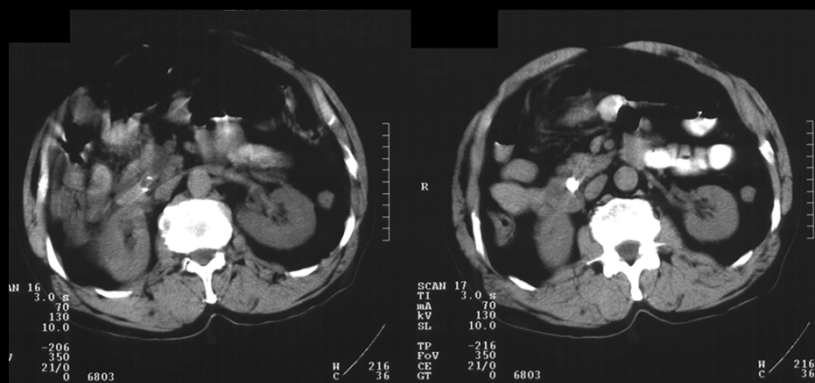
Dilatação de vias biliares intra-hepáticas – Tomografia computadorizada



Dilatação de vias biliares extra-hepáticas – Tomografia computadorizada



Cálculo de colédoco – Tomografía computadorizada



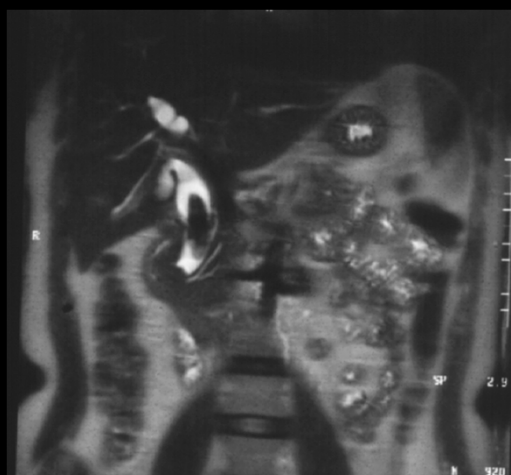
Colangiografía por RM



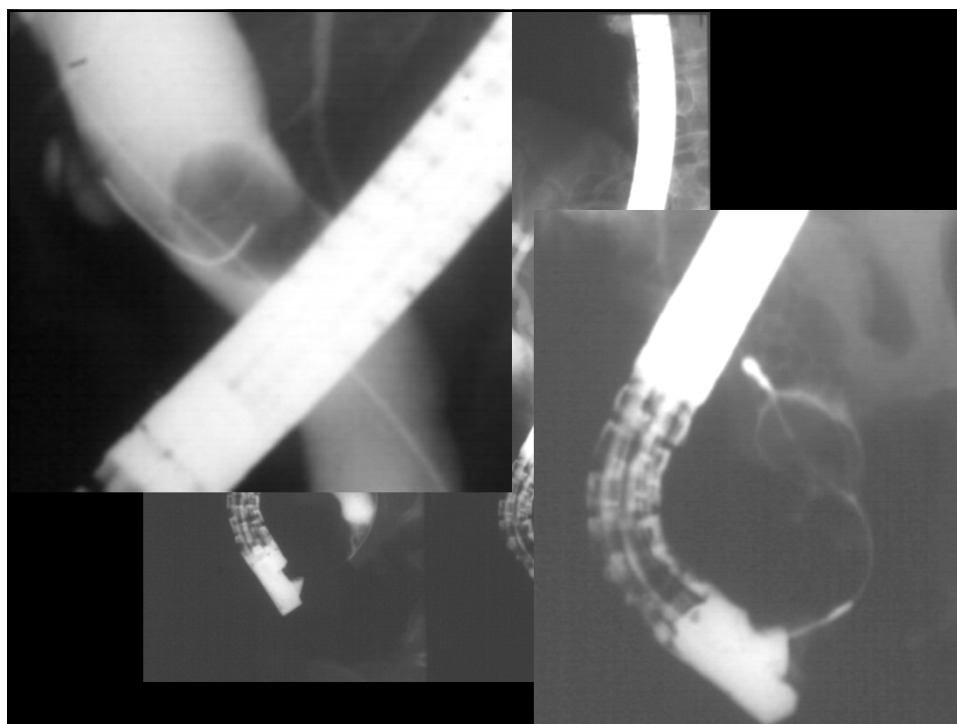
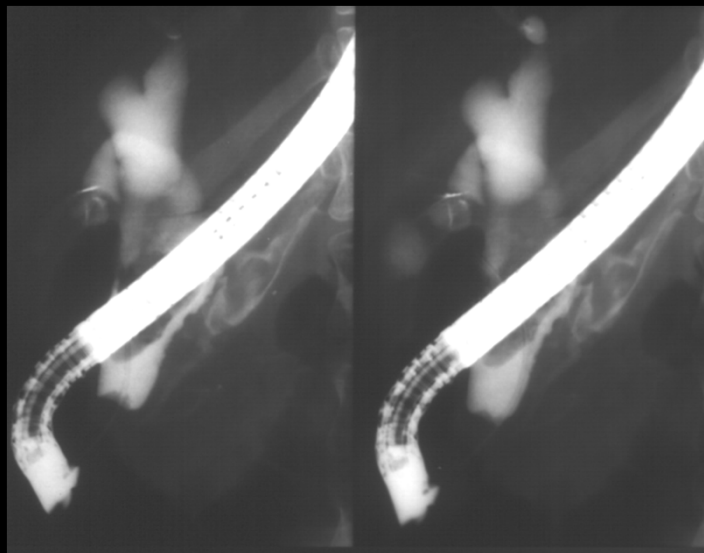
Cálculos no colédoco – Colangiografia por RM

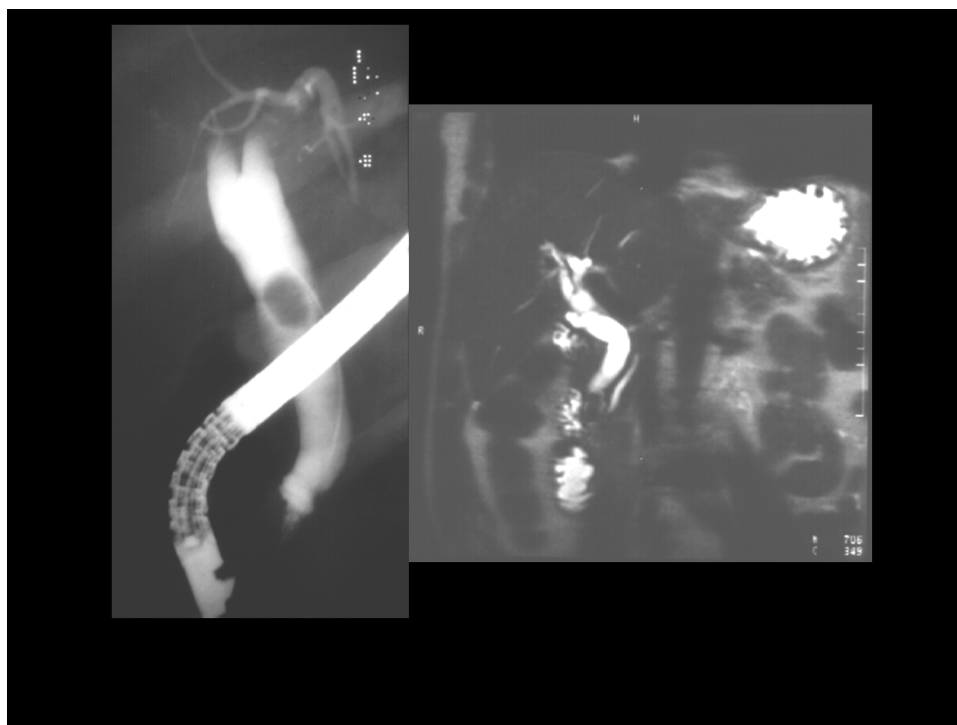


Cálculos no colédoco – Colangiografia por RM



Cálculo no colédoco – CPRE

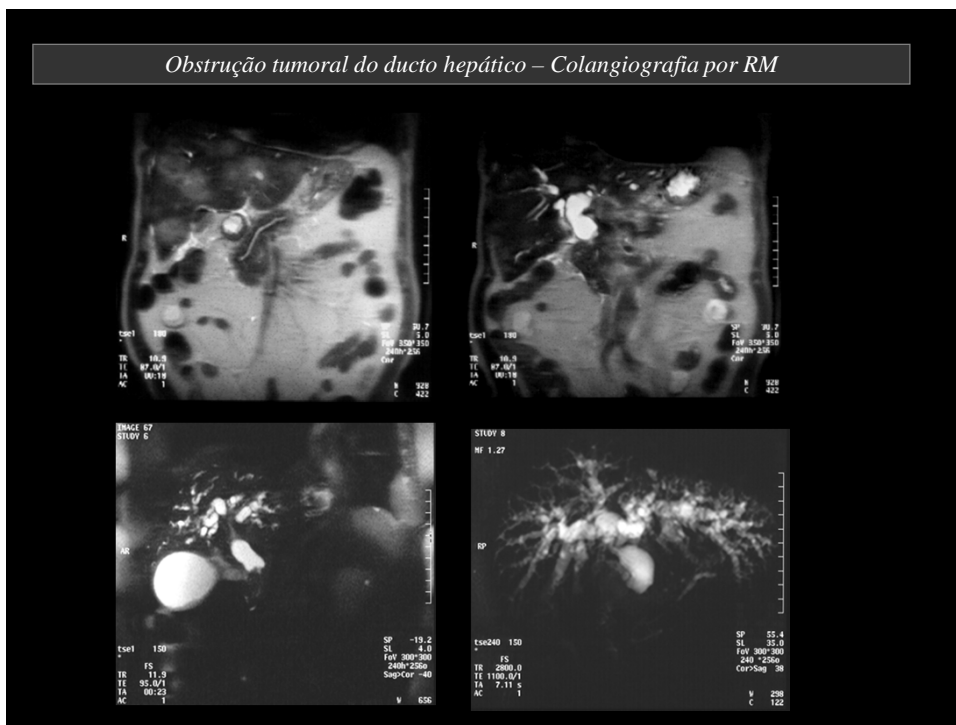




Tumor de papila duodenal – US



Obstrução tumoral do ducto hepático – Colangiografia por RM



Obstrução tumoral do colédoco / tumor de papila – Colangiografia por RM



