The “Sausage” pancreas

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IgG4-related disease (IgG4RD) is a complex, immune-mediated illness characterized by lymphoplasmacytic infiltration of multiple organs, accompanied by an elevated serum IgG level [1]. Pancreatic involvement has been termed autoimmune pancreatitis (AIP) [2].

On contrast-enhanced CT (CECT), the pancreas is enlarged, with featureless border and effacement of the lobular contour (the “sausage” analogy as shown in Fig. 1). A capsule-like rim, thought to represent inflammatory cell infiltrate, encircles the pancreas with a halo of amorphous soft tissue attenuation material [3]. The dense lymphoplasmacytic infiltrate can afflict extrapancreatic tissues as well, including kidneys (Fig. 2), retroperitoneum, bile ducts, and salivary glands [3].

Fig. 1. Amorphous *sausage*-like enlargement of the pancreas, with a rim of nondescript intermediate attenuation value of soft tissue (arrows). Note the absence of peripancreatic fluid or inflammation.

Fig. 2. Axial CECT of the same patient 10 years later, revealing IgG4RD nephropathy as a wedge-shaped hypoenhancing zone dorsally in the right renal cortex (arrows). Note also the atrophic changes of chronic AIP.

Lack of adjacent inflammation or peripancreatic fluid helps in distinguishing AIP from other pancreatitis. However, differentiating AIP (particularly the localized form) from malignancy remains a diagnostic challenge [3]. Corticosteroids are the preferred therapy for AIP.

Compliance with ethical standards

Conflict of interest All the authors declare that they have no conflict of interest.

Ethical approval This article does not contain any studies with human participants or animals performed by any of the authors.

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