

Lethal obstructive jaundice: a diagnosis not to be missed

An ultrasound scan of a 60-year-old man with obstructive jaundice demonstrated sludge in the gall bladder and a dilated biliary tree. He underwent an endoscopic retrograde cholangiopancreatography and biliary stenting. He experienced poorly localized abdominal pain and a magnetic resonance cholangiopancreatography demonstrated normal biliary and pancreatic ducts.

Three months later, his pain worsened. Computed tomography showed a thick-

ening in the head of the pancreas (1 and 2) with metastasis in the lungs.

Whenever a patient presents obstructive jaundice, carcinoma pancreas should be excluded. A computed tomogram scan should be organized appropriate. [BJHM](#)

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Figure 2. Transverse section of a computed tomography scan of pancreas demonstrating thickening of head of pancreas and a biliary stent.