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**Endoscopic ultrasonography in chronic asymptomatic pancreatic hyperenzymemia: why not?****Filippo Antonini, Giampiero Macarri, Raffaele Pezzilli****Running title:** EUS in CAPH**Filippo Antonini<sup>1</sup>, Giampiero Macarri<sup>1</sup>, Raffaele Pezzilli<sup>2</sup>**<sup>1</sup>Department of Gastroenterology, A.Murri Hospital, Polytechnic University of Marche, Fermo, PO Box 63900, Italy<sup>2</sup>Department of Digestive Diseases and Internal Medicine, Sant'Orsola-Malpighi Hospital, Bologna, PO Box 40138, Italy**Word count:** 541**Corresponding author:**

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Dear Editor,

we read with interest the commentary by Frulloni et al [1], in which they comment the article by Di Leo et al. published in the November 2016 issue of Digestive Liver Disease [2].

In this letter, Frulloni et al. questioned the role of endoscopic ultrasound (EUS) in the management of patients with chronic asymptomatic pancreatic hyperenzymemia (CAPH) due to its elevated costs, invasiveness and operator-dependancy. Moreover they raised doubts on the real clinical significance of minimal morphological alterations revealed by EUS. For these reasons they suggest magnetic resonance imaging (MRI) and cholangio-pancreatography magnetic resonance (MRCP) as the modalities of choice for subjects with CAPH.

We have recently assessed the role of EUS on 73 patients with CAPH resulted normal at

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