

Clinical Profile in Acute Pancreatitis and its Management- A Study in a Teaching Hospital

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Abstract

Background: Acute pancreatitis is an inflammatory disease of pancreas with progressive destruction of exocrine part of the pancreas. The disease is very common with wide range of clinical features and incidence is increasing due to increased intake of alcohol. The symptoms can be from mild to fulminant with MOF and mortality. **Methods:** This prospective study was conducted on patients admitted to Prathima Institute of Medical Sciences, Karimnagar. N=45 patients of acute pancreatitis were enrolled for the study. N=5 patients were excluded since they did not fulfill the diagnostic criteria. Therefore n=40 were available for analysis. The diagnostic criteria included at least one of the following it was based on the U.K. guidelines for the management of acute pancreatitis. **Results:** The median age of the study group was 35 years (Range 17 – 65 Years). N=32 (80%) were males and n=8 (20%) females. The commonest presentation was with pain in the abdomen and vomiting. Pain in abdomen was present in 37 (92.73 %) patients and vomiting in 24 (60 %) patients. Other clinical features included distention of abdomen in 6 (15%) cases, fever in 8 (20%) cases and jaundice in 3 (7.5%) cases. N=4 patients of biliary Pancreatitis underwent cholecystectomy. n=2 open Cholecystectomy with CBD exploration, n=2 laparoscopic cholecystectomy, n=1 in the same admission (12 days after symptom onset) and others on follow up. Nutritional support was given to 6 patients with severe acute pancreatitis. N=4 patients had nasojejunal (NJ) feeding ranging from 6 to 25 days and 2 patients were given total parenteral nutrition (TPN) ranging from 10 to 44 days. The median hospital stay was 12 days (Range – 3 to 65 days). **Conclusion:** The incidence of acute pancreatitis was found to be in a 4th decade in our study. Serum Amylase and Lipase both should be (80 % sensitivity) used for diagnosis where ever possible. CT abdomen has got 100% sensitivity and it must be done in all doubt full cases. In our study alcoholic pancreatitis was the most common type. This explains the need for large scale health education programs to quit alcohol which can act as screening methods to prevent the onset or limit the severity of the disease.