AIM: To compare the results of exocrine and endocrine functions in patients before and after LPJ.

METHODS AND MATERIALS: This is a single institutional prospective study which includes patients with chronic pancreatitis undergoing lateral pancreatico jejunostomy during the period of 2011-2013 in osmania general hospital. The study includes patients with dilated main pancreatic duct and patients of 20-70yrs of age. It excludes patients with associated complications like pseudocysts, abscess, malignancies etc and immunosuppressive disorders like HIV,HCV and HbsAg. It also excludes the assessment of pain and improvement in quality of life.

This study was started with 30 patients and the mean follow up for 6 months after the surgery was done. Pancreatic exocrine and endocrine status of the patients undergoing the Partington-Rochelle modification of lateral pancreatico jejunostomy, measured in terms of insulin requirement for diabetes and presence of steatorrhea is done in this study using a paired t-test.

RESULTS: Out of 30 patients in the study, 2 patients died, and 3 patients did not turn up for follow up, therefore these 5 cases are excluded from the study.

Out of 25 patients, 18 were diabetic preoperatively and among them 8 were on oral hypoglycaemic drugs and 10 were insulin dependent. After the surgery 16 were still diabetic, 9 required oral hypoglycaemic drugs and 7 required insulin. This shows that even though there is improvement in the endocrine functions of the pancreas postoperatively, it is not of significant value.

Out of 25 patients, 19 were having steatorrhea preoperatively and among them 5 patients became free of steatorrhea postoperatively. This shows a significant improvement in the exocrine function when compared to endocrine function after the surgery.

DISCUSSION: Chronic pancreatitis is the persistent inflammation and irreversible fibrosis associated with atrophy of the pancreatic parenchyma. Abdominal pain remains the most debilitating symptom affecting the quality of life, apart from diabetes mellitus, steatorrhea and weight loss.

Risk factors are many such as alcohol abuse, smoking, gene mutations, gall stones etc.