



## A PROSPECTIVE STUDY OF THE AETIOLOGY AND OUTCOME OF ACUTE PANCREATITIS IN ASRAM MEDICAL COLLEGE, ELURU.

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**ABSTRACT** **AIM :** As rates of hospitalization for acute pancreatitis continue to increase, Acute pancreatitis is the leading cause of hospitalization among for gastrointestinal disorders. The aim of this study was to evaluate the aetiology and outcome of acute pancreatitis.

**METHODS:** Between August 2018 and July 2019, 42 cases of acute pancreatitis were admitted to the hospital. Diagnosis was ascertained by clinical examination and investigations. The patients were treated according to a designed protocol. The data related to aetiology, severity and outcome were noted for subsequent analysis.

**RESULTS:** Of the 42 patients, 35 were male and 7 were female.. The aetiology spectrum of pancreatitis included the following : alcoholism in 31 (73.80%), gallstones in 6 (14.28%), trauma in 2 (4.76%), idiopathic in 3 (7.14%). There were 2 deaths in this group due to multi-organ failure.

**CONCLUSION:** Although gallstones have largely been implicated as a common cause of acute pancreatitis our study found alcoholism as the main aetiological factor. Blunt abdominal trauma was also seen in 2 cases.

### KEYWORDS :

#### INTRODUCTION

Acute pancreatitis is a common acute surgical condition. The annual incidence worldwide is 4.9–73.4 cases per 100 000 people.<sup>1,2</sup>

Accurate diagnosis is important because many other conditions have similar symptoms, including acute cholecystitis, choledocholithiasis, and penetrating duodenal ulcers. Because of the frequent emergency, multimodality presentation, difficult preoperative diagnosis and management of complications, this challenging subject is taken up for the present study in which we will be studying the clinical profile and management of the acute pancreatitis in our hospital.

#### AIMS OF THE STUDY

To study the acute pancreatitis with particular reference to the etiological factors and clinical presentations associated with it in the patients presenting to our hospital.

#### MATERIALS AND METHODS

This prospective study is between AUGUST 2018 and JULY 2019 and about 42 patients are studied and the analysis is done on all the 42 patients (n=42) And the patients presenting with components mentioned in the exclusion criteria were not included in the study.

The diagnosis of Acute Pancreatitis is most often established by the presence of two of the three following criteria:<sup>4</sup>

- Abdominal pain consistent with the disease,
- Serum amylase and / or lipase greater than three times the upper limit of normal
- Characteristic findings from abdominal imaging

#### INCLUSION CRITERIA

- Patients presenting to or referred to Department of General Surgery that are admitted and diagnosed to have Acute Pancreatitis.
- Patients fulfilling the diagnostic criteria
- Patients presenting with recurrent attack in known cases of pancreatitis.

#### EXCLUSION CRITERIA

- Chronic Pancreatitis patients presenting with acute episodes.
- Pediatric Patients

#### RESULTS:

##### AGE DISTRIBUTION

AGE (YR)	PATIENTS(n=42)	PERCENTAGE(%)
15-24	3	7.14%
25-34	13	30.19%
35-44	19	45.23%
45-54	4	9.52%
55-64	2	4.76%
>65	1	2.3%

##### SEX DISTRIBUTION

SEX	PATIENTS(n=42)	PERCENTAGES
MALE	36	85.71%
FEMALE	6	14.28%

##### CLINICAL FEATURES

CLINICAL FEATURE	NUMBER OF PATIENTS(n=42)	PERCENTAGE(%)
PAIN	42	100%
NAUSEA/VOMITING	29	69.04%
ABDOMINAL DISTENTION	13	30.95%
FEVER	15	35.74%
JAUNDICE	4	9.5%

##### ETIOLOGY

ETIOLOGY	NUMBER OF PATIENTS(n=42)	PERCENTAGE(%)
Alcoholic	31	73.8%
Trauma	2	4.76%
Biliary calculi	6	14.28%
idiopathic	3	7.14%

##### COMPLICATIONS

COMPLICATIONS	PATIENTS WITH COMPLICATIONS (n=42)	PERCENTAGE AMONGST COMPLICATIONS (%)
NECROSIS	8	28.57%
PSEUDOCYSTS	5	17.85%
ASCITIS	5	17.85%
PLEURAL EFFUSION	8	28.57%
ASCITES + PLEURAL EFFUSION	2	7.14%

**SYSTEMIC COMPLICATIONS AND MORTALITY**

FAILURE	Number Of Patients
ARDS	5
ARF	7
GI BLEED	1
DEAD	2

Surgical Procedures	Number Of Patients(n=42)	PERCENTAGE(%)
CHOLECYSTECTOMY	1	2.38%
ABSCESS DRAINAGE	1	2.38%
NECROSECTOMY	1	2.38%
CYSTOGASTROSTOMY	3	7.14%

The following table shows a comparison between etiological factors in various studies.

**Table - 18**

Etiological factor	Present Study (n=42) %	Satyanarayana Rao S V et al.(n=60) %	SuhaibRehaman et al.(n=38) %
Alcohol	73.8	76.6	50
Biliary	14.28	5	21.1
Idiopathic	7.14	18.3	28.9
Trauma	4.76	0	0

**DISCUSSION :**

Our study has a pattern of etiological factors which on par with the other studies also showing increased incidence with alcohol as the etiological factor, which is differed from the regular high incidence of acute pancreatitis with gall stones as the etiological factor

This trend can be attributed to the prevalence of agricultural labourers who consume low quality alcohol and also attributed to the high alcohol intake among labourers along with the low quality. Hence we like to convey by saying that the high rate of alcohol ingestion and also the low quality available to them due to the financial restraints has put the patients under a great debt of health burden to them and also the hospital in-patient load leading to a great concentration of health resources to the avoidable factors like these prevailing in our geographical area and particularly to the patients presenting to the ASRAM MEDICAL COLLEGE, Eluru.

Along with these we also like to put forward that a few number of patients presenting were also females a few of them also presenting with alcohol ingestion. A few numbers with biliary stones as the cause in both males and females. Two cases with a history to trauma to the abdomen in vehicular accidents developed acute pancreatitis de novo attributing to the trauma as the etiological factor which is an interesting finding as, trauma was rarely seen to cause acute pancreatitis in the patients presenting to our hospital and has been a challenging experience to us.

**CONCLUSION:**

Acute Pancreatitis is a common cause of acute abdomen. However varied might be the etiological factor of acute pancreatitis. Our study has noticed an incidence to acute pancreatitis with alcohol as the major etiological factor.

