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A Legacy of Care

PANCREATITIS

Pancreatitis is inflammation in the pancreas.

- The pancreas is a long, flat gland that sits tucked behind the stomach in the upper abdomen. The pancreas produces enzymes that help digestion and hormones that help regulate the way your body processes sugar (glucose).

ACUTE PANCREATITIS

Appears suddenly and lasts for days.

CHRONIC PANCREATITIS

Occurs over many years.

Mild cases of pancreatitis may go away without treatment, but severe cases can cause life-threatening complications.

SYMPTOMS

ACUTE PANCREATITIS

- Upper abdominal pain
- Abdominal pain that radiates to your back
- Abdominal pain that feels worse after eating
- Fever
- Rapid pulse
- Nausea
- Vomiting
- Tenderness when touching the abdomen



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CHRONIC PANCREATITIS

- Upper abdominal pain
- Losing weight without trying
- Oily, smelly stools (steatorrhea)

CAUSES

- Pancreatitis occurs when digestive enzymes become activated while still in the pancreas, irritating the cells of your pancreas and causing inflammation.
- With repeated bouts of acute pancreatitis, damage to the pancreas can occur and lead to chronic pancreatitis. Scar tissue may form in the pancreas, causing loss of function. A poorly functioning pancreas can cause digestion problems and diabetes.

PREDISPOSING CONDITIONS

- Abdominal surgery
- Alcoholism
- Certain medications
- Cystic fibrosis
- Gallstones
- High calcium levels in the blood (hypercalcemia), which may be caused by an overactive parathyroid gland (hyperparathyroidism)
- High triglyceride levels in the blood (hypertriglyceridemia)
- Infection
- Injury to the abdomen
- Obesity
- Pancreatic cancer
- Endoscopic retrograde cholangiopancreatography (ERCP) - a procedure used to treat gallstones - also can lead to pancreatitis
- Sometimes a cause for pancreatitis is never found



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RISK FACTORS

Factors that increase your risk of pancreatitis include:

- **Excessive alcohol consumption.** Research shows that heavy alcohol users (people who consume four to five drinks a day) are at higher risk of developing pancreatitis.
- **Cigarette smoking.** Smokers are on average three times more likely to develop chronic pancreatitis.
- **Obesity.** You're more likely to get pancreatitis if you're obese.
- **Family history of pancreatitis.** The role of genetics is becoming increasingly recognized in chronic pancreatitis.

ACUTE PANCREATITIS TREATMENT

- A hospital stay to treat [dehydration](#) with [intravenous](#) (IV) fluids and, if you can swallow them, fluids by mouth.
- Pain medicine, and [antibiotics](#) by mouth or through an IV if you have an infection in your pancreas.
- A low-fat diet, or [nutrition](#) by feeding tube or IV if you can't eat.
- Surgery. Your doctor may recommend surgery to remove the gallbladder, called cholecystectomy.
- Procedures. Your doctor or specialist will drain fluid in your abdomen if you have an [abscess](#) or infected [pseudocyst](#) or a large pseudocyst causing pain or bleeding. Your doctor may remove damaged tissue from your pancreas.
- Endoscopic Cholangiopancreatography (ERCP). Doctors use [ERCP](#) to treat both acute and chronic pancreatitis. ERCP combines [upper gastrointestinal endoscopy](#) and [x-rays](#) to treat narrowing or blockage of [bile](#) or [pancreatic duct](#). Your gastroenterologist may use ERCP to remove gallstones blocking the bile or pancreatic ducts.



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TREATMENT FOR CHRONIC PANCREATITIS

- Treatment for chronic pancreatitis may help relieve pain, improve how well the pancreas works, and manage complications.
- Medicines and vitamins. Your doctor may give you enzyme pills to help with digestion, or [vitamins A, D, E, and K](#) if you have [malabsorption](#). He or she may also give you [vitamin B-12](#) shots if you need them.
- Diabetes treatment. Chronic pancreatitis may cause [diabetes](#). If you get diabetes, your doctor will work with you to create an eating plan and a routine of medicine, [blood glucose monitoring](#), and regular checkups.
- Surgery. Your doctor may recommend surgery to relieve pressure or blockage in your pancreatic duct, or to remove a damaged or infected part of your pancreas. Surgery is done in a hospital, where you may have to stay a few days.
- In worse cases, surgery is done to remove your whole pancreas, followed by islet auto-transplantation. Islets are groups of cells in your pancreas that make [hormones](#), including [insulin](#). After removing your pancreas, doctors will take islets from your pancreas and transplant them into your [liver](#). The islets will begin to make hormones and release them into your bloodstream.
- Procedures. Your doctor may suggest a nerve block, which is a shot of numbing medicine through your skin and directly into nerves that carry the pain message from your pancreas or if gallstone, then it can be removed surgically.

DIAGNOSIS

- Blood tests to look for elevated levels of pancreatic enzymes
- Stool tests in chronic pancreatitis to measure levels of fat that could suggest your digestive system isn't absorbing nutrients adequately
- Computerized Tomography (CT) scan to look for gallstones and assess the extent of pancreas inflammation
- Abdominal ultrasound to look for gallstones and pancreas inflammation
- Endoscopic ultrasound to look for inflammation and blockages in the pancreatic duct or bile duct
- Magnetic Resonance Imaging (MRI) to look for abnormalities in the gallbladder, pancreas and ducts.



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COMPLICATIONS

- **Pseudocyst.** Acute pancreatitis can cause fluid and debris to collect in cysts, when they rupture they can cause internal bleeding and infection.
- **Infection.** Acute pancreatitis makes one vulnerable to bacteria that may require intensive treatment or surgery to remove the infected tissue.
- **Kidney failure.** Acute pancreatitis may cause kidney failure, leading to dialysis.
- **Breathing problems.** May cause chemical changes in your body that affect your lung function, causing the level of oxygen in your blood to fall to dangerously low levels.
- **Diabetes.** Damage to insulin-producing cells in your pancreas from chronic pancreatitis can lead to diabetes
- **Malnutrition.** Both acute and chronic pancreatitis can cause your pancreas to produce fewer of the enzymes that are needed to break down and process nutrients from the food you eat. This can lead to malnutrition, diarrhoea and weight loss.
- **Pancreatic cancer.** Long-standing inflammation in your pancreas caused by chronic pancreatitis is a risk factor for developing pancreatic cancer.

PREVENTION OF PANCREATITIS

- Limit alcohol consumption. By drinking less (or not at all), you can help protect your pancreas from the toxic effects of alcohol and reduce your risk for pancreatitis.
- Eat a low-fat diet.
- Exercise regularly and lose excess weight.
- Skip crash diets.
- Don't smoke.



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PREVENTION OF PANCREATITIS

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e: clinics@mpshahhosp.org

t: 0204 429 1000 / 0733 606752 / 0722 204427

