

Acute pancreatitis

Information for patients

This information sheet answers some of the questions you may have about acute pancreatitis. It explains the disease process and causes. It also explains what you can expect during your admission. If you have any other questions or concerns, please do not hesitate to speak to the doctors or nurses caring for you.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your name and date of birth and check your ID band. If you do not have an ID band we will also ask you to confirm your address. If we do not ask these questions, then please ask us to check. Ensuring your safety is our primary concern.

What is acute pancreatitis?

Acute pancreatitis is a condition where the pancreas becomes inflamed (swollen) over a short period of time.

What is the pancreas?

The pancreas is an organ, located behind the stomach. It produces fluid that contains chemicals (enzymes) that help to digest food. These enzymes pass through a small pipe called the pancreatic duct. This joins the pipe from the liver and gallbladder (bile duct) to empty into the intestine just after the stomach.

The pancreas also has special cells that secrete hormones such as insulin directly into the bloodstream to control the blood sugar level.

What causes acute pancreatitis?

The commonest causes of pancreatitis are gallstones and alcohol. Gallstones can block the pancreatic duct and the digestive enzymes start to digest parts of the pancreas. Alcohol can also cause inflammation in the pancreas. Other less common causes include high blood fat levels and some medications. In one out of five cases, we do not know the cause.

What are the signs and symptoms?

Acute pancreatitis usually starts with severe pain in the upper abdomen and back. There may be associated nausea, vomiting and abdominal swelling. In most cases, the inflammation is mild and settles within a week or so. In one out of five patients, the inflammation quickly becomes severe. Parts of the pancreas and surrounding tissues may be damaged (necrosis) and become infected. Infection can spread into the blood stream and this can lead to sepsis and organ failure. This is a very serious situation, which can be fatal.

How do we diagnose acute pancreatitis?

Pancreatitis is usually diagnosed by symptoms, a physical exam and a blood test called amylase, which is an enzyme produced by the pancreas. A CT scan can also diagnose acute pancreatitis.

We may carry out an ultrasound scan to look for a gallstone if this is the suspected underlying cause. Other types of scans, such as an MRI scan, may be needed.

How do we treat acute pancreatitis?

Treatment usually involves admission to hospital. We may give you intravenous fluids and pain relief. We aim to treat the cause to reduce the chance of further attacks of pancreatitis, which may be more severe in the future.

If we find gallstones, we usually recommend an operation to remove the gall bladder. We will do the operation during the same admission or soon after. Some patients need a special procedure, called an endoscopic retrograde cholangiopancreatography (ERCP), to clear the duct of stones.

We will advise you to stop drinking alcohol if we believe that is the cause of the acute pancreatitis. We will offer you help if needed. When the cause is not obvious, you will need to visit our outpatients' clinic and have some tests to try to find the cause.

Severe pancreatitis is a life threatening condition. You may need multiple scans and drainage tubes put into the pancreas with X-ray guidance. In rare cases, you may need an operation to remove the damaged parts of the pancreas.

How long will I stay in hospital?

Patients with less severe pancreatitis usually stay in hospital for a few days and recover completely. Patients with severe pancreatitis can be in hospital for many days, weeks or even months depending on how bad the inflammation is.

Will it happen again?

An attack of acute pancreatitis may be a one-off event. However, if there is an underlying cause, then it may happen again unless the cause is corrected. We recommend that you do not drink alcohol for several months after having severe pancreatitis, even if alcohol was not the cause.

Who to contact?

If you have any queries or concerns, please contact the Surgical Ambulatory Care Unit (SACU) on 020 3299 7089. The unit is open every day from 8am to 6pm.

Sharing your information

We have teamed up with Guy's and St Thomas' Hospitals in a partnership known as King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas'. To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between the hospitals.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. The PALS office is located on the ground floor of the Hambleden Wing, near the main entrance on Bessemer Road - staff will be happy to direct you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS:

Tel: 020 3299 3601

Email: kch-tr.palsdh@nhs.net

You can also contact us by using our online form at www.kch.nhs.uk/contact/pals

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.