

Clinical Study of Demographic Profile, Etiology, Severity and Outcome of Acute Pancreatitis in a Tertiary Care Teaching Hospital in Northern India

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the Western population due to X] YfYbWg in sociocultural habits. [23]. Outcome in case of severe acute pancreatitis depends upon early diagnosis and gIYV W timely intervention. Variability in geographical distribution of risk factors, diversity in demographics across the world, failure in establishing relation between risk factors and the disease uniformly across the globe by common consensus, ever changing trends in the clinical course of the disease over the last few decades, lack of prevalence data of the disease in the country, changing trends in predictability of severity, complexity of the disease and changing trends in the outcome, prompted us to undertake this study to determine the demographic drc Yz etiology, severity and outcome of acute pancreatitis in the patients admitted in our institution in the surgery department.

Materials and Methods

lg prospective cohort study was conducted between December 2016 to December 2017 with a sample size of 50 consecutive cases admitted in the department of general surgery in a tertiary care hospital in northern India with all newly diagnosed cases of acute pancreatitis admitted in the surgery department with age 16 years and no past history of AP were included in the study. Y demographics of each patient were recorded i.e. age, sex, address, occupation, marital status, BMI, habits etc. A detailed clinical history was obtained from each patient and thorough clinical examination was done to establish clinical diahical

All cases were of blunt trauma to the abdomen without any penetrating injury. 2 cases (4%) of the study group (n=50) were diagnosed with AP induced post operatively (cholecystectomy).

Of these, one was male and one female. YF were 5 patients (all

same country in X] YfYh regions. Results of some of the studies compared to present study are summarized in Figure 2

having severe AP compared to females. So, from our results we can say that males were found to be more prone to get severe AP compared to females.

Of all the cases of biliary AP, 85.71% cases had mild AP and 14.29% had severe AP. On sub group analysis, it was found that of all the cases of male biliary AP, 27.27% cases had severe form of the disease while of the cases of biliary AP among females, 9.67% cases had severe AP which shows males are more prone to develop severe biliary AP compared to females. In the study in Jamaica by Reid et al. [4], 9.4% cases had severe AP which is low compared to that of our study. While in the study by Jha et al. [19], 22.72% cases of biliary AP had severe AP which quite high compared to our study. It shows variability in the severity and unpredictability in the clinical course of the disease in XJ Ybh regions. However, mortality has decreased substantially over the time in AP.

Y mean length of stay in our study was found to be 6.82 days. In mild and severe AP, it was 5.73 and 11.78 days respectively. Overall, it was lower as compared to mean hospitalisation time of 9.6 days for all cases, 20 days for severe AP of the Polish study by Justyna et al. [27] and 9.51 days of the Jamaican study by Reid et al. [4]. As 2 cases in our

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