

Surgery for Severe Acute Necrotizing Pancreatitis – Which is the Best Procedure?

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Abstract

Surgical management of acute necrotizing pancreatitis is rapidly evolving with newer minimally invasive techniques replacing traditional open necrosectomy as the preferred surgical procedure at various centres worldwide. But one needs to take in to account multiple factors while choosing the most appropriate procedure for a given patient. Also one needs to plan based on the clinical condition of the patient and the timing of intervention that whether patient will benefit from 'Step up approach' or primary necrosectomy. These critical issues have been discussed so as to facilitate clinical decision making and importance of multidisciplinary team is highlighted in order to reduce morbidity and mortality associated with severe acute necrotizing pancreatitis.

Keywords: Acute necrotizing pancreatitis; Necrosectomy; Step up approach; Walled off pancreatic necrosis

Commentary

Recently, various minimally invasive techniques [MIT] have been described for acute necrotizing pancreatitis [ANP] which has better outcomes compared to open necrosectomy [OP] [1,2]. But one needs to understand that there is lot of heterogeneity in the current data to make any conclusion favouring any of the techniques. Also none of these MIT can be universally used in all patients unlike open necrosectomy. Hence appropriate patient selection is important. Another important factor to be considered during selection is time of intervention from the onset of pancreatitis. Most of the MIT have been shown to be safe and effective when performed 4-6 weeks after the onset of pancreatitis i.e. after development of walled off pancreatic necrosis [WOPN]. If the patient has worsening of clinical condition despite supportive care before that with large (peri) pancreatic collections, percutaneous catheter drainage [PCD] is considered. This so called 'Step up approach' helps in drainage of liquefied pus under

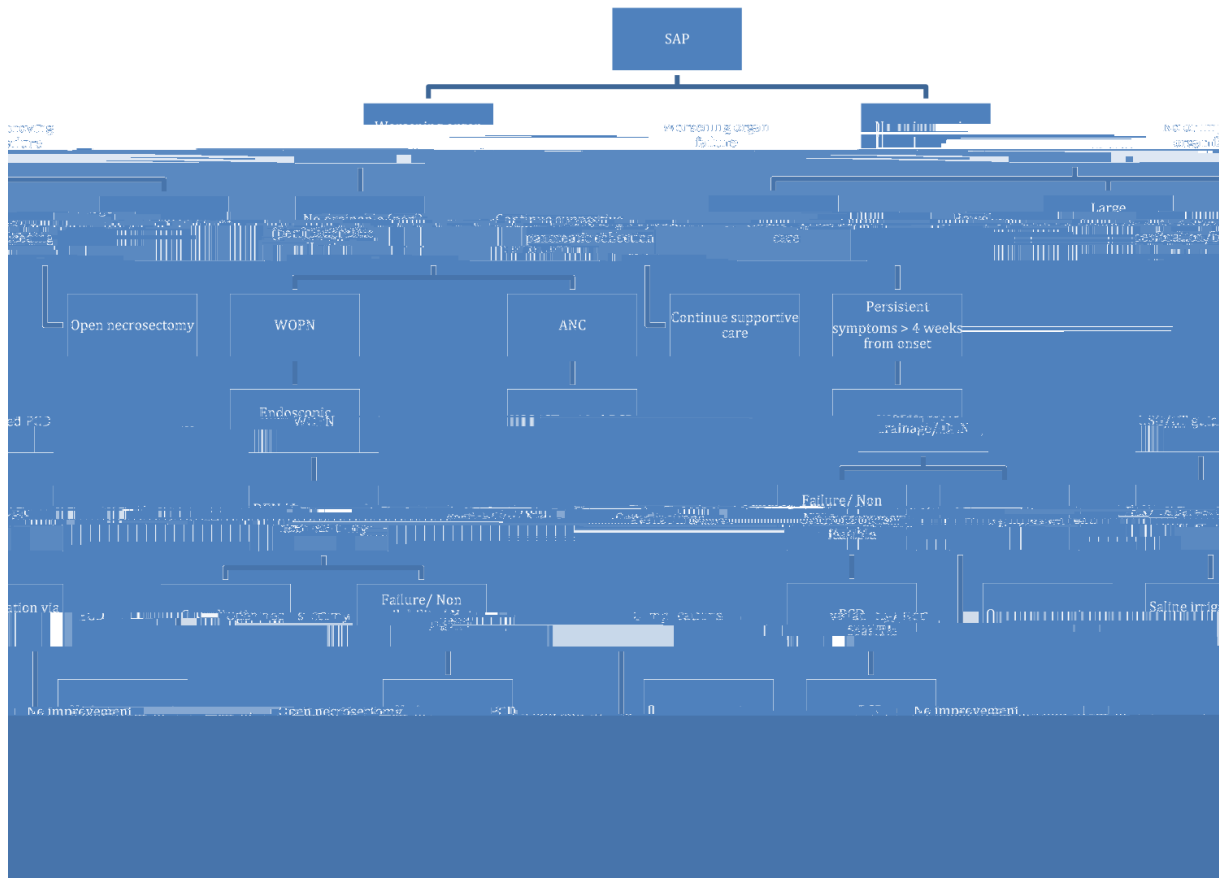


Figure 1: A practical algorithm for multidisciplinary management of severe acute necrotizing pancreatitis. [ANC–acute necrotic collection, DEN–Direct endoscopic necrosectomy, PCD–percutaneous catheter drainage, SAP–Severe acute pancreatitis, VAR–Video assisted retroperitoneal, WOPN–walled off pancreatic necrosis]

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