

Management of Acute Pancreatitis

Clinical Guidelines



Royal College of Surgeons in Ireland
November 2003



Clinical Guidelines Committee

Royal College of Surgeons in Ireland

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Gallstones	Hyperlipidemia	Infective	Mumps
Alcohol	Hypercalcaemia		Coxsackie
			AIDS
Idiopathic	Drug induced steroids		Ascariasis
	Thiazide diuretics	Autoimmune	SLE
	Azithioprin		Sjogren's syndrome
	Trauma		
	Blunt abdominal		
	Post-ERCP		
	Mechanical		
	Pancreatic divisum		
	Pancreatic carcinoma		
	Periampullary diverticulum		

1. WCC >15,000 mm³
2. Blood glucose >10 mmol/L
3. Blood urea >16 mmol/L
4. LDH >600IU/L
5. AST >200IU/L
6. Plasma albumin <32g/L
7. Uncorrected plasma Ca⁺⁺ <2mmol/L
8. Arterial PaO₂ <8 kPa

Criteria present at presentation	Criteria developing within the first 48 hours
1. Age >55 years	6. Haematocrit fall >10%
2. WCC >16,000/mm ³	7. Blood urea >16mmol/L
3. Blood glucose >10mmol/L	8. Serum Ca ⁺⁺ <2mmol/L
4. LDH >350IU/L	9. Arterial PaO ₂ <8 kPa
5. AST >250 IU/L	10. Base deficit >4 mmol/L
	11. Fluid sequestration >6L

Acute physiology score

- | | |
|--|---|
| 1. Temperature | 9. Serum creatinine (Double score if ARF*) |
| 2. Mean arterial pressure | 10. Haematocrit |
| 3. Heart rate (ventricular response) | 11. WCC |
| 4. Respiratory rate (ventilated or non-ventilated) | 12. Glasgow coma scale
(score = 15 – actual GCS) |
| 5. Oxygenation | |
| 6. Arterial pH | |
| 7. Serum sodium | |
| 8. Serum potassium | |

The APACHE II score is given by the sum of the acute physiology score and points given for age and chronic health evaluation.

*ARF: Acute renal failure.

1. Enlargement of pancreatic gland
2. Ill-defined margins
3. Abnormal enhancement
4. Thickening of peripancreatic planes
5. Blurring of fat planes
6. Intra- and retro-peritoneal fluid collections
7. Pleural effusions
8. Pancreatic gas indicative of necrosis/abscess formation
9. Pseudocyst formation



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