

The value of early biliary and pancreatic decompression mininvasive performed in acute pancreatitis

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Abstract

Introduction: Acute pancreatitis is an acute inflammatory process of the pancreas, with variable involvement of other regional tissues or remote organ systems.

Materials and methods: In an ongoing effort to search for optimal solution in the management of acute pancreatitis, a serious and unpredictable disease, even in the context of therapies that are part of modern therapeutic protocols line, we offer an original pathogenic and mininvasive therapeutic approach. The purpose is to bring attention to this original treatment method and highlight its advantages. During a five year period (2006-2010), 60 consecutive cases of acute pancreatitis were admitted and treated at Clinic Surgery 2 from Sibiu.

Results and discussion: Out of the 60 patients, 42 cases were mild pancreatitis and 18 cases were severe pancreatitis according to Atlanta criteria. All cases of edematous acute pancreatitis received conservative medical therapy in combination with laparoscopic biliary decompression. 6 cases of severe acute pancreatitis developed pancreatic abscess and pancreatic necrosis.

Conclusions: The favorable evolution of cases treated laparoscopically, and length of stay varying between 7 and 34 days, requiring evaluation of laparoscopy in the surgical treatment of acute pancreatitis as the first and sometimes the only form of surgical treatment of cases (acute pancreatitis), selected dynamically.

Key words: acute pancreatitis, laparoscopic colecistostomy, oddian spasmolysis, touch periesofagian vagolysis, surgical therapeutic window

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