

LETTER TO THE EDITOR

Comments on the Article “Management of Suspected Acute Inflammatory Pancreatopathies in a "Real-world" Setting: A Single-Centre Observational Study”

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Dear Sir,

I read with great interest the study titled ‘Management of suspected acute inflammatory pancreatopathies in a "real-world" setting: a single-centre observational study’ by De Nuzzo *et al.* [1] in the March 2014 issue of Journal of Pancreas. I completely agree with the authors that in the “real world” setting the management of acute pancreatopathies is not performed as recommended by guidelines. However, some aspect of this study need to clarified for a better understanding of results provided by the authors.

First, the title of the study indicates that management of “suspected” acute pancreatopathies and authors indicated that number of patients admitted with “suspected” acute pancreatopathies was 147 but for unknown reason, authors analyzed data of only 112 patients with a “final” diagnosis of acute pancreatopathies. If the analyzed 112 patients had confirmed diagnosis of acute pancreatopathies then the word “suspected” should not be included in the title.

Second, the authors did not specify if all the patients fulfilled the Atlanta criteria for confirming the diagnosis of acute pancreatitis specially when 7 out of 112 patients did not have abdominal pain and pancreatitis was diagnosed in these patients because of elevation in amylase and lipase [2].

Third, a large number of patients, 51 (45.5%) did not undergo CT scan in the study, whereas contrast enhanced CT scan is considered as imaging of choice for the diagnosis and evaluation of development of complications of acute pancreatitis which could possibly lead to omission of a large number of patients with acute pancreatitis and its complications.

This study sheds light on the non-adherence to standards for the care of acute pancreatitis patients but I believe that the clarification of the above mentioned concerns would make this study more robust.

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