

Acute Pancreatitis

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This month's quiz is based on the article "Acute Pancreatitis: Review and Clinical Update," which begins on page 9 of this issue. Choose the single best answer for each question.

- 1. A 20-year-old woman is admitted to the hospital with suspected acute gallstone pancreatitis based on clinical history and laboratory studies. What is the best initial imaging study in this situation?**
 - (A) Contrast-enhanced abdominal and pelvic computed tomography (CT) scan
 - (B) Endoscopic ultrasound
 - (C) Magnetic resonance imaging with magnetic resonance cholangiopancreatography
 - (D) Noncontrast abdominal and pelvic CT scan
 - (E) Right upper quadrant ultrasound
- 2. Patients with acute pancreatitis who develop pancreatic pseudocysts should undergo drainage of these lesions in which of the following situations?**
 - (A) Communication with the pancreatic duct
 - (B) Evidence of infection within the cyst
 - (C) Presence of multiple internal septations within the pseudocyst
 - (D) Presence of a thick rind-like cyst wall
 - (E) Size greater than 4 cm
- 3. A 45-year-old man develops acute pancreatitis several days after starting oral azathioprine for Crohn's disease. On presentation, his initial serum lipase level is 11,500 U/L. The offending drug is stopped, the patient is admitted to the hospital, and he is treated conservatively with intravenous (IV) fluids and analgesia. On hospital day 2, his serum lipase level is 6400 U/L, and on day 3 his serum lipase level is 5100 U/L, suggesting that the rate of decline has begun to slow. The patient begins to feel better clinically and is tolerating clear liquids by mouth. For what duration of time should daily serum lipase be monitored in this patient?**
 - (A) 2 more days
 - (B) 1 week
 - (C) 1 month
 - (D) Until the value returns to normal
 - (E) There is no further need to obtain daily serum lipase levels in this patient
- 4. A 50-year-old woman presents to the emergency department with epigastric abdominal pain radiating to her back with associated nausea and vomiting. Her serum lipase level is 8400 U/L, and the patient is diagnosed with acute pancreatitis. The patient is administered an IV analgesic. What is the next best step in caring for this patient?**
 - (A) Begin IV fluid resuscitation
 - (B) Begin prophylactic antibiotics to minimize the risk of pancreatic infection
 - (C) Change her diet to clear liquids by mouth only
 - (D) Obtain a contrast-enhanced CT scan of the abdomen
 - (E) Obtain a right upper quadrant ultrasound
- 5. Which of the following medications has been shown to definitively prevent the development of post-endoscopic retrograde cholangiopancreatography pancreatitis?**
 - (A) Allopurinol
 - (B) Heparin
 - (C) Octreotide
 - (D) Prednisone
 - (E) None of the above
- 6. A "sentinel loop" seen on an abdominal radiograph in a patient with acute pancreatitis suggests which of the following?**
 - (A) Gastric volvulus
 - (B) A localized small or large bowel ileus
 - (C) An obstructed common bile duct
 - (D) An obstructed gallbladder
 - (E) A pancreatic pseudocyst

For answers, see page 7.

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Answers to the Clinical Review Quiz, which appears on page 20. The article on acute pancreatitis begins on page 9.

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| 1. (E) Right upper quadrant ultrasound | 4. (A) Begin IV fluid resuscitation |
| 2. (B) Evidence of infection within the cyst | 5. (E) None of the above |
| 3. (E) There is no further need to obtain daily serum lipase levels in this patient | 6. (B) A localized small or large bowel ileus |

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