**PATHOLOGY AND PATHOGENESIS OF ACUTE AND CHRONIC PANCREATITIS:**

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**Objectives:**

At the end of the two lectures the students will be able to:

1. Recognize the predisposing factors of pancreatitis.
2. Describe the different types of pancreatitis.
3. Understand the pathogenesis of acute and chronic pancreatitis..

**Introduction**

Pancreatitis is well known in the medical practice. Systemic and/or local factors play a major role in the initiation, occurence and outcome of pancreatitis. The predisposing factors will be discussed. The pathogenetic mechanisms will also be addressed . A pathological description of the different types of pancreatitis will be considered.

**Key Outlines:**

1. Pancreatitis : causes and clinical manifestations.
2. Predisposing factors : stones, tumors etc...
3. Pathology of Acute and Chronic pancreatitis including the complications of pancreatitis (i.e pseudocyst..).
4. Pathogenetic mechanisms.

**Summary**

Pancreatitis may have an acute or a chronic form. The predisposing factors are widespread. An understanding of the causative mechanisms, clinical presentation, pathology and treatment will be covered.

**Take home message**

The student will investigate into the causes of pancreatitis, the pathogenetic mechanisms and the histological findings related to acute and chronic pancreatitis

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**Prescribed reading:**

Pathologic Basis of Disease, Robbins and Cotran

**Further Reading**

Harshmohan

*Abdelmalek AlSheikh, MBBS,FRCPC*

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MCQ:

1. A 52 year old male present to the accident and emergency complaining of a severe abdominal pain radiating to the back. The patient is known alcoholic . He is found to have increased serum amylase. What is the most likely diagnosis in this case?
2. Chronic pancreatitis
3. Acute pancreatitis
4. Perforated colon
5. Acute appendicitis

Answer: B

1. A 67 year old male is operated for removal of a pancreatic lesion. The patient history includes an episode of acute pancreatitis 2years ago. The most likely histological feature on microscopic examination is the presence of a:
2. Serous cyst
3. Mucinous cyst
4. Pancreatic pseudocyst
5. Choledocal cyst

Answer: C

1. Fibrosis , cystic dilatation of the ducts, loss of the pancreatic acini and lymphocytic infiltration of the pancreas are most likely seen in:
2. Chronic pancreatitis
3. Infiltrating ductal carcinoma of the pancreas
4. Acute pancreatitis
5. Solid pseudopapillary tumor of the pancreas

Answer: A

1. Patients with acute pancreatitis may develop :

A-Loss of the islets of Langerhans and the onset of diabetes.

B- Acinar cell carcinoma secondary to the inflammation

C-Cushing syndrome with hypercortisolemia

D-Solid pseudopapillary tumor of the pancreas

Answer: A

1. The most frequent cause of acute pancreatitis is :

A-*Ascariasis lumbricoides*

B-Periampullary tumor

C-Gallbladder stones

D-Medications

Answer: C

1. What are the most frequent laboratory findings in patients with acute pancreatitis?
2. Elevation of serum lipase followed by elevation of amylase.
3. Normal amylase level with elevation of lipase level only.
4. Normal lipase level with elevation of amylase level only
5. Elevation of amylase levels followed by a rising of lipase.

Answer: D