



Images in clinical practice

Acute Pancreatitis: Prognosis of Vascular Complications.

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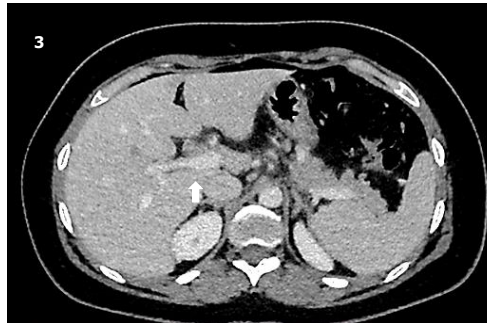
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Case 1

A 61-year-old female was admitted for confirmed acute pancreatitis. Abdominal CT revealed peripancreatic fat infiltration and fluid collections. The patient developed a septic syndrome on the second week. CT scan showed a newly developed aneurysm dilatation of the anterior segmental right artery and a thrombosis of the right portal branch (Figure1). Aneurysm embolization was performed successfully (Figure2).



Case 2

A 28-year-old male with no history, was admitted for severe acute biliary pancreatitis. The cholecystectomy was postponed. He presented six month later with pancreatitis recrudescence. Abdominal CT scan showed acute pancreatitis with fluid collections and right portal vein thrombosis (Figure3). Anticoagulant treatment was prescribed. The cholecystectomy was done after portal vein permeabilization (Figure4).



Comments

Acute pancreatitis (AP) is an acute inflammatory process of the pancreas with variable clinical presentations. Splanchnic venous thrombosis is a well-known vascular complication of AP and commonly present as thrombosis of the splanchnic venous system: splenic vein (SplV), portal vein (PV) and superior mesenteric vein (SMV), either separately or in combinations. Vascular abnormalities are commonly seen in late-stage acute pancreatitis and chronic pancreatitis. However, only few reports studied vascular involvement occurring in the early phase of the disease [1]. extra-splanchnic venous system thrombosis as well as arterial system are rarely described [2]. Vascular complications are more frequent in necrotizing acute pancreatitis [3]. These complications are underdiagnosed, which may justify the systematic MRI assessment of AP cases [4]. Vascular complications are prognostic indicators of pancreatitis severity [5].

Conflict of Interest: None

References

- [1] Ahmed M, Aziz MU, Mansoor MA, Anwar S. Vascular complications in cases of acute pancreatitis - CT scan-based study. *J Pak Med Assoc.* 2016;66:977-89.
- [2] Parmeshwar Ramesh J, Sanjay C, Udgirkar S, Sujit N, Prasanta D, Ammar M, et al. Multiple extra-splanchnic venous thromboses - an unusual vascular complication of acute pancreatitis. *Clin Pract.* 2020 ;10:1226.
- [3] Dike CR, Cress G, Fishman DS, Gonska T, Ooi CY, Perito ER, et al. Vascular Complications in Pediatric Pancreatitis: A Case Series. *J Pediatr Gastroenterol Nutr.* 2021;73:e94-e97.
- [4] Jiang ZQ, Xiao B, Zhang XM, Xu HB. Early-phase vascular involvement is associated with acute pancreatitis severity: a magnetic resonance imaging study. *Quant Imaging Med Surg.* 2021;11:1909-20.
- [5] Vujasinovic M, Dugic A, Nouri A, Brismar TB, Baldaque-Silva F, Asplund E, et al. Vascular Complications in Patients with Chronic Pancreatitis. *J Clin Med.* 2021 ;10:3720.