



LIVING WITHOUT A PANCREAS REPORT #2735

BACKGROUND: The pancreas is an organ which plays an essential role in converting the food we eat into fuel for the body's cells. The two main functions of the pancreas are an exocrine function that helps digestion and an endocrine function that regulates blood sugar. Exocrine enzymes include trypsin and chymotrypsin to digest proteins; amylase for the digestion of carbohydrates; and lipase to break down fats. The endocrine component of the pancreas consists of islet cells that create and release important hormones directly into the bloodstream. Two of the main pancreatic hormones are insulin, which acts to lower blood sugar, and glucagon, which acts to raise blood sugar. The pancreas is located behind the stomach in the upper left abdomen. It is surrounded by other organs including the small intestine, liver, and spleen. It is spongy, about six to ten inches long, and is shaped like a flat pear or a fish extended horizontally across the abdomen.

(Source: <https://columbiasurgery.org/pancreas/pancreas-and-its-functions>)

CHRONIC PANCREATITIS: CAUSES AND SYMPTOMS: Chronic pancreatitis is an inflammation of your pancreas that doesn't improve over time. It's considered acute when the inflammation comes on suddenly and only lasts for a short period of time, and chronic when it keeps coming back or the inflammation doesn't heal for months or years. It can lead to permanent scarring and damage. Calcium stones and cysts may develop in your pancreas, which block the duct, or tube, that carries digestive enzymes and juices to your stomach. The blockage may lower the levels of pancreatic enzymes and hormones, which will make it harder for your body to digest food and regulate your blood sugar. This can cause serious health problems, including malnutrition and diabetes. Changes in your pancreas can become quite advanced before you begin to feel bad. When symptoms occur, they may include pain in your upper abdomen; diarrhea; fatty stools, which are loose, pale, and don't flush away easily; nausea and vomiting; shortness of breath; unexplained weight loss; and excessive thirst and fatigue.

(Source: <https://www.healthline.com/health/chronic-pancreatitis#symptoms>)

MORE TREATMENT OPTIONS: Johns Hopkins has a team-based approach to evaluating and managing patients with chronic pancreatitis. They constantly look for new medical, endoscopic and surgical therapies for treating these patients. Endoscopic therapy is most commonly offered to those patients who have a dilated pancreatic duct. These patients undergo an endoscopic procedure known as an endoscopic retrograde cholangiopancreatography. The goal of this procedure is to dilate strictures, to remove pancreatic duct stones and to place pancreatic duct stents. There have been more developments in the field of endoscopic ultrasound with celiac plexus blockade. This procedure can be used to help alleviate the pain associated with chronic pancreatitis, at least in the short-term, as more long-term options are pursued. The greatest option that has emerged over the years for the surgical treatment of chronic pancreatitis is total pancreatectomy with or without islet cell transplantation.

(Source: https://www.hopkinsmedicine.org/transplant/news_events/media/transcripts/auto_islet/pancreatitis_treatment.html)

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