

# **PSGB&I 15<sup>TH</sup> Annual Meeting**

30<sup>th</sup> November -2<sup>nd</sup> December 2022

### BACKGROUND

- Acute pancreatitis is largely a clinical diagnosis confirmed by symptoms/signs and a raised lipase up to 3 times the upper limit of normal
- CT imaging at presentation is only recommended in cases of diagnostic uncertainty
- A CT scan of the abdomen exposes a patient to approximately 50 times that of a conventional x-ray (7.7-15.4 msv)
- CT scan does not predict severity or detect evidence of complications within the first 48-72 hours of presentation

### AIM

- To identify if CT scans were requested in line with existing guidelines and, develop a plan/pathway to improve clinical practice.
- To prevent patients from exposure to unnecessary radiation, mitigate against increased cost of patient care, and ensure adherence to guidelines.

Retrospective study over 6 month period

Data sources: clinical coding, radiology IT systems, and hospital records to identify patients presenting with acute pancreatitis

Patient demographics, aetiology of pancreatitis, serum lipase levels on admission, use of CT scan within the first 48-72hours, and clinical indication for CT request were studied.

Following data analysis, a multidisciplinary approach was undertaken involving surgery, the emergency department, radiologists, and postgraduate education coordinators within the hospital

A carefully designed Acute pancreatitis management pathway algorithm was designed and implemented

## CT SCAN IS NOT A FIRST LINE DIAGNOSTIC IMAGING IN ACUTE **PANCREATITIS: ARE WE DOING TOO MANY, TOO EARLY?** (IMPROVING CLINICAL PRACTICE IN A DGH) AUTHORS : N ANYAUGO, K BUTCHER, T MACCARTHY, C ROSSI





In our study, there was excessive usage of early CT scanning which added little benefit in managing acute pancreatitis patients.

Our local pancreatitis management pathway was designed using a multidisciplinary approach that identified an opportunity to improve practice and its use is currently being audited to ascertain if clinical standards have improved.

### NHS **University Hospitals Bristol and Weston NHS Foundation Trust**

## **IMPROVING PRACTICE**



## CONCLUSIONS