

## The spectrum and outcome of acute pancreatitis patients with acute kidney injury

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**Statement of the Problem:** Acute Pancreatitis (AP) results in 100,000 hospitalizations per year and the incidence of acute pancreatitis ranges from 13 to 45 per 100,000 population-years. Eighty percent of cases of AP are interstitial and mild; the remaining 20% to 30% are necrotizing and severe with hospital mortality rates of 15%. Acute Kidney Injury (AKI) is a common serious complication of AP and an important marker of morbidity and mortality in critically ill patients. The prognosis of AP patients with AKI is extremely poor with mortality rates ranging between 25-75%.

**Purpose of the Study:** To study the disease spectrum and outcome in patients of AP with AKI.

**Study Type:** Prospective, longitudinal, and observational.

**Methodology & Theoretical Orientation: Study Design:**

**Cross Sectional Study:** The main source of data for the study was collected from patients with AP admitted in Department of General Medicine and Gastroenterology department of Santokba Durlabhji Memorial Hospital, Jaipur.

**Findings:** AKI was found in 27 out of total 144 study subject resulting in an incidence of 18.75% in our study. Mean age of patients who developed AKI was  $50.48 \pm 20.45$  which was significantly higher when compared to patients without AKI ( $40.97 \pm 16.13$ ) with a P value of 0.009. BMI of AP patients, who developed AKI, was higher ( $24.56 \pm 3.08\text{kg/m}^2$ ) when compared to patients without AKI ( $22.90 \pm 2.36\text{kg/m}^2$ ) with p value 0.002. Patients who had higher SOFA score at admission had greater chance of developing AKI. Patients of AP with AKI had average hospital stay of  $12.22 \pm 8.60$  days v/s  $8.41 \pm 5.87$  in non AKI patients. ICU stay in AKI group ( $8.07 \pm 8.99$ ) was also longer when compared to non AKI group ( $1.74 \pm 4.31$ ). AP patients who developed AKI had significantly high mortality (48.15% Vs 1.71%) as compared to patients of AP without AKI. Patients of AP with AKI had very high mortality 48.15% (13 out of 27) as compared to total of 117 patient of AP without AKI where mortality was 1.71%.

**Conclusion & Significance:** From current study we can conclude that, AKI is a serious complication of AP and leads to a poor outcome.

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## Biography

Piyush Mathur is presently working as Senior Consultant Nephrologist at Santokba Durlabhji Memorial Hospital, Jaipur, India which is a 550 bedded multispecialty hospital and teaching institute. He has nearly 25 years of experience after MBBS, working at various institutes and organizations and at various positions including general practice, teaching, specialty, and super specialty training. He is Faculty for CRRT and AKI. He has many publications in national and international journals. He was an author of chapters on Continuous Renal Replacement Therapies and [Acute Kidney Injury](#) in many textbooks of Nephrology Principal, sub-investigator in many clinical trials.

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