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Introducing a new pancreaticojejunal anastomosis: Double-"U" suture embedding and purse-string binding pancreaticojejunostomy

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Post-operative pancreatic fistula (PF) is the most dangerous complication of pancreatic surgery. We developed a new pancreaticojejunal anastomosis which has been proved to be effective in reducing the incidence of PF. In this method, we firstly do two "U" mattress sutures to embed the pancreas remnant into the lumen of jejunum and then tie and fix it, and then bind the jejunum remnant around the pancreas with a purse-string suture. We name this new pancreaticojejunal anastomosis: Double-"U" suture embedding and Purse-string binding pancreaticojejunostomy. We have launched a retrospective comparative clinical study to investigate the effectiveness and feasibility of double-"U" suture embedding and purse-string binding pancreaticojejunostomy. In this study, we investigated 106 consecutive patients who underwent double-"U" suture embedding and purse-string binding pancreaticojejunostomy (double-"U" group), as well as 102 consecutive patients who underwent traditional embedding pancreaticojejunostomy (traditional group) at our hospital from March, 2011 to March, 2015. The results show that compared with traditional group, double-"U" group has significantly lower PF rate and shorter hospital stay.

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Expression of mRNA of TLR2, TLR4 in dynamics in patients with retroperitoneal pancreatogenic phlegmon

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Acute pancreatitis is a common clinical condition. Excessive systemic inflammatory response syndrome (SIRS) in acute pancreatitis leads to distant organ damage and multiple organ dysfunction syndromes (MODS), which is the primary cause of morbidity and mortality in this condition. Development of in vivo experimental models of acute pancreatitis and associated systemic organ damage has enabled us to study the role played by inflammatory mediators in the pathogenesis of acute pancreatitis and associated systemic organ damage. Using these models, recent studies have established the critical role played by inflammatory mediators in acute pancreatitis and the resultant MODS. Hydrogen sulfide (H2S) plays an important role in cardiovascular, central nervous and gastrointestinal systems and has been shown to act as a vasodilator. We have also shown that H2S acts as a mediator of inflammation. Substance P is 11 amino-acid neuropeptide that is released from nerve endings in many tissues. Subsequent to its release, substance P binds to neurokinin-1 (NK-1) receptors on the surface of effector cells. Using experimental models, recent studies in our laboratory have established the critical role played by H2S and substance P in acute pancreatitis. Furthermore, early results point to the clinical relevance of this research. Studies with experimental animal models of disease will therefore help define the role of these mediators in the pathogenesis of acute pancreatitis and can lead to the development of novel therapeutic approaches for this condition.

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