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## The surgeon vs. the gastroenterologist in the management of acute biliary pancreatitis-Where does the intensivist stand

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The high prevalence of gallstones within the Saudi Arabian population is the leading cause of Acute Pancreatitis (AP), the disease notorious for its range of severity and challenging management options. AP is a medical disease that is commonly managed by surgeons in most of the institutions within Saudi Arabia. AP is a wait and sees disease an area that is well mastered by the physicians, where the surgeons lack a huge deal of experience in this field, and indeed they feel incapacitated exactly as if you take the rifle from a sniper and you tell him to wait and see. Surgeons choose surgery because they are doers and physicians chose medicine because they are thinkers and nothing wrong with either choice, but things get missy when you through a medical ball such as AP in the field of surgeons, they suddenly want to kick it while in fact it's an oracle crystal ball. At the same time Gastroenterologists maximum input would be to do and ERCP, while it can be difficult sometimes, but still a 1 hour challenge would melt in front of daily continuous care. Here comes the choreographer; the designer of the initial aggressive resuscitation, the follow up and the de-resuscitation phase to take back all the excess fluids that have been given. The aim of this presentation is to discuss in brief the resuscitation principles and endpoints of the Systemic Inflammatory disease as a result of AP and rule played by the Intensivist through the whole phases of challenging cases of AP. The integration of the echocardiographic target goals of resuscitation, the dry resuscitation principles, the abdominal compartment syndrome, vacuum management in open abdomen and the de-resuscitation towards the recovery phase. In this article I'm trying to capture the whole aspect of the complicated pancreatitis management within the ICU setting, from the eye of a surgeon/Intensivist.

### Biography

Abdulaziz Shafer is a Board Certified General Surgeon and Intensive Care Fellow. He is an Associate Fellow of the American College of Surgeons, Active Member in the Saudi and the American Critical Care Societies with a specific interest in acute care surgery, resuscitation and trauma.

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