

Prominent extraperitoneal collection due to severe necrotizing pancreatitis

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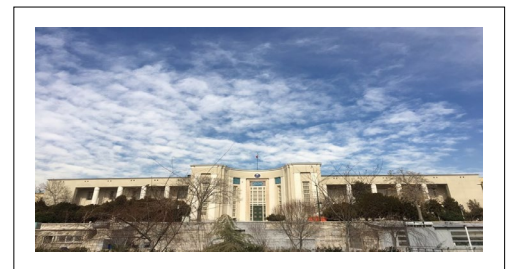
Abstract

A 68-year-old man with history of suspicious pancreatic mass presented to the emergency department complaining of abdominal pain and gradual abdominal distention. He had experienced epigastric pain, nausea/vomiting, progressive abdominal distention and icter for a duration of 2-weeks prior to admission. The patient had misdiagnosed as pancreas malignancy with ascites due to severity and uncommon location of the collections. abdominopelvic CT scan revealed extensive necrotizing pancreatitis with prominent extraperitoneal collection which extended from retroperitoneal space to anterior extraperitoneal space and pushed abdominal viscera backward. We decided to use "Step up" approach to manage the patient and after 4weeks the patient discharged. Using minimally invasive techniques such as percutaneous drainage of peripancreatic collections (called step up approach) could reduce morbidity and mortality rate in critically ill patients with necrotizing pancreatitis.

The Necrotizing Pancreatitis is not a rare condition, but this patient has special points for presentation. His Abdominopelvic CT scan has uncommon pattern and the shape of his extraperitoneal fluid collection made us to explain the complex rout of extraperitoneal cavities with schematic, simple and interesting images. The another interesting point about this case report is the special and also logical management of a complex patient, which can help the other surgeons to manage the ones.

Biography

Narjes MohammadZadeh finished the general surgery education at the age of 29 years and currently she was accepted as a faculty member of Tehran University Of Medical Sciences. This 3 years as a faculty member in a referral hospital (Imam Khomeini Hospital Complex) she did many advance surgeries in different fields. She has published 6 papers in eligible journals.



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