

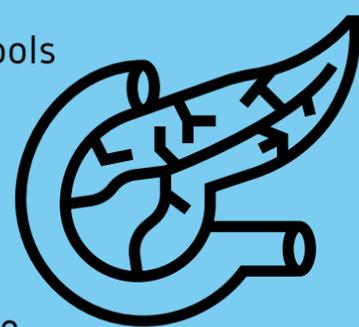
DIAGNOSING PANCREATITIS: A TOOLKIT

Pancreatitis is a complex disease. This toolkit is intended to help patients understand and navigate the diagnosis process.

WHAT ARE MY SYMPTOMS?

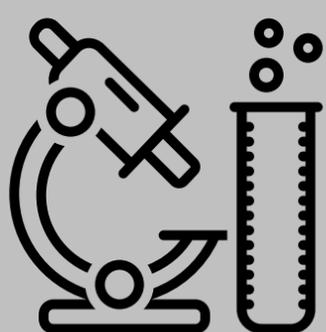
Identify symptoms that apply to you

- Pain
Describe where you feel pain and patterns you have observed, i.e. timing of pain relative to eating, foods that trigger pain, intensity of pain
- Maldigestion
Color, frequency, form, smell, and oil content of stools
- Digestive Issues
Vomiting, nausea, bloating, cramping
- Weight Loss
Amount of weight lost and over what period of time
- Fatigue and Sleep
- Other Issues such as skin irritation, brittle hair, thin nails, etc



IS MY PANCREAS INFLAMED?

Diagnosis typically involves a review of:



- 1 Patient symptoms
- 2 Laboratory tests and imaging
- 3 Patient & family history

Physical exam

- Locates pain in the pancreas
- Evaluates all symptoms



PATIENT SYMPTOMS

LAB TESTS AND IMAGING

Biomarkers

- Inflammatory markers (CRP, ESR)
- Lipase/amylase, triglyceride, and glucose levels
- Fat-soluble vitamin deficiencies (A, D, K, B12, E)
- Pancreatic elastase

Imaging

- Endoscopic ultrasound to detect changes in pancreas
- CT scan to check for lesions



- Family history of pancreatitis and/or pancreatic cancer
- Other syndromes

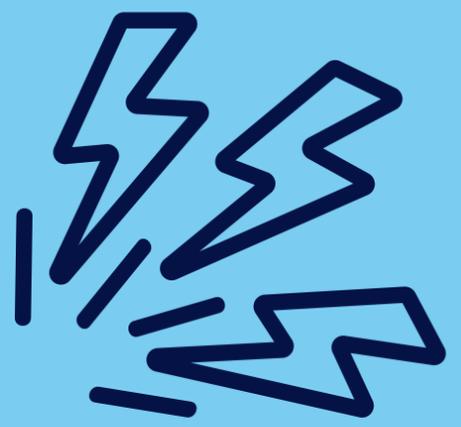


PATIENT & FAMILY HISTORY

WHAT IS CAUSING MY PANCREAS TO INFLAME?

One or more of the following could inflame the pancreas:

- Autoimmune conditions
- Metabolic factors
- Genetics
- Physiology



CAUSES OF PANCREATIC INFLAMMATION

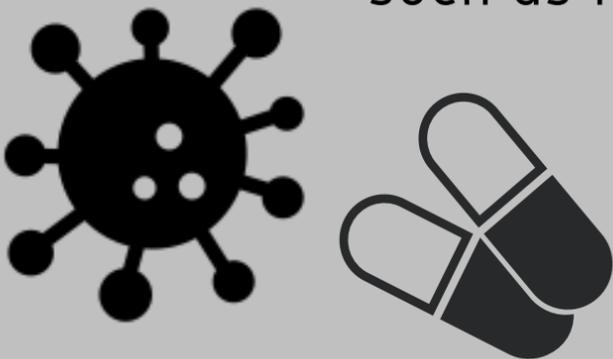
AUTOIMMUNE

→ Autoimmune Pancreatitis Type I & II

METABOLIC FACTORS

→ Conditions known to cause pancreatitis such as methylmalonic acidemia (MMA), hypercalcemia

→ Lipid disorders such as hypertriglyceridemia
→ Medications
→ Tobacco use



GENETIC

→ PRSS1, CFTR, or SPINK1 mutations
→ FCS (Familial Chylomicronemia Syndrome)
→ Complex genetics



PHYSIOLOGY

→ Pancreas divisum
→ Gallstones
→ Duct strictures
→ Cysts or tumors

COULD ALCOHOL BE THE CAUSE OF MY DIAGNOSIS?

- Recent research indicates that alcohol only contributes to chronic pancreatitis if people drink 3-5 drinks per day or more for an extended period of time; smoking is a much greater risk factor
- Most or all patients who had been diagnosed with “alcoholic” chronic pancreatitis also have genetic variants that may contribute to their disease
- Alcohol should be considered as a possible factor only AFTER an exhaustive analysis of possible causes of pancreatic inflammation.

KEY TAKE-AWAYS

- A good physical exam can suggest the possibility of pancreatic disease.
- Elevated inflammatory markers can be the only laboratory clue to pancreatic inflammation.
- EUS findings (Rosemont criteria) are often present when all other imaging tests are negative.
- Doctors should conduct a thorough investigation of the causes of pancreatic inflammation before labeling “idiopathic” or “alcoholic”

Mission:Cure