

459 Implication of Changes in Management of Acute Pancreatitis During COVID-19 Pandemic

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Introduction: when COVID-19 pandemic stroked the country, the Royal College of Surgeons recommended cholecystectomy for gall stone pancreatitis could be delayed up to 12 weeks during Covid-19 pandemic. This may have exposed patients to recurrent gall stone morbidity and serious complications.

Method: Patients admitted with gall stone pancreatitis during Covid-19 period 12th March 2020 till 15th June 2020 to Western Sussex hospitals were analysed retrospectively for a period of 3 months post index submission. The endpoints were readmission rates and complication relating to gall stones.

Results:

- 32 patients admitted with acute gall stone pancreatitis, age 24-92 years (median 69) and a median hospital stay of 4 days.
- 4(12.5%) patients had cholecystectomy during index admission. 1 died of pancreatitis during index admission.
- Of the remaining 27 patients, 11 (40.7%) were readmitted with recurrent pancreatitis (6); biliary sepsis (2); obstructive jaundice (1); spontaneous splenic haemorrhage (1) (died); recurrent biliary colic (1). The median time to readmission was 40 days (6 -89).

Conclusions: Delaying cholecystectomy for gallstone pancreatitis to 3 months is associated with significant readmission rates and serious complications. Cholecystectomy for gallstone pancreatitis should be categorised as 1B or 2 during Covid-19 period.