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Severity assessment of acute pancreatitis using ct severity index and modified ct severity index: association with clinical outcomes and ranson's criteria.

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ABSTRACT:

Acute pancreatitis is a disease with high rate of morbidity and mortality and is known to run an unpredictable course. It has a broad spectrum of findings that varies in severity from mild interstitial or oedematous pancreas to severe forms with significant local and systemic complications. Severe pancreatitis occurs in 20%–30% of all patients with acute pancreatitis and is characterised by a protracted clinical course, multi-organ failure, and pancreatic necrosis. The present study was conducted with the purpose of correlating MCTSI and CT severity Index with clinical outcome in patients of acute pancreatitis.

Study Population

All the patients who referred to radiology department with a clinical diagnosis of acute pancreatitis.

Sample Size: 80

Study Design: A hospital based screening test study.

Statistical Analysis: Association between qualitative variables was assessed by Chi-Square test. A p-value < 0.05 was taken as level of significance.

CONCLUSION

Our study showed highly significant correlation between the MCTSI score and the prediction of end organ failure, systemic infection and duration of hospital stay and mortality. However no significant correlation found with the need for surgical intervention. There was significant correlation of grades of severity of acute pancreatitis based on MCTSI with patient outcome parameters than grades of severity of acute pancreatitis based on CTSI.

KEY WORDS: pancreatitis, modified CT severity index, CT severity index, hospital stay.