

Out of 16 patients, 12 were treated with Frey's procedure and splenectomy, 2 were treated with Lateral pancreaticojejunostomy with splenectomy and 2 were treated with Izbicki procedure with splenectomy. One patient required Cholelithotomy for jaundice along with Frey's. Average duration of surgery was 200 minutes with mean blood loss 240 ml. Eleven patients required blood transfusion. The followup period was 3–57 months. None of them had UGI bleed in the followup period.

**Conclusion:** Concomitant splenectomy should be strongly considered in patients undergoing operative treatment of symptomatic chronic pancreatitis with sinistral portal hypertension. Adding splenectomy to the pancreatic procedure did not increase morbidity or mortality.

#### EP02A-015

### PATIENTS' PERSPECTIVES ON FUTURE CLINICAL AND RESEARCH TOPICS IN PANCREATIC DISEASES

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**Introduction:** Topics and outcomes for clinical research are usually determined by clinicians which may differ from patients' preferences. We aimed to assess the most relevant clinical and research topics according to patients with pancreatic disease.

**Methods:** A combined questionnaire was developed for patients with acute pancreatitis (AP), chronic pancreatitis (CP) and pancreatic cancer (PC). In June 2014 this questionnaire was distributed to 925 members of the Dutch national pancreatic patient association.

**Results:** The response rate was 32.6% (N = 302/925); AP 28.5%, CP 31.1%, AP/CP 23.8%, PC 14.2%, and other 2.3%. The most relevant problems reported were pain by 69.2% of patients and fatigue by 52.0%. Of all patients 52.7% felt they had suboptimal pain management. More patients with AP and CP considered pain and diet major problems as compared to PC patients; 76.0% vs. 52.5%, p = 0.002, and 36.4% vs. 17.5%, p = 0.02. Fewer AP and CP patients felt they received sufficient information about their disease compared to PC patients; 61.8% vs. 81.0%, p = 0.04. Previous participation in medical research was a positive experience to 65.1% (54/83 patients) of patients. In total, 65.9% of all patients would be willing to participate in future medical research. Nutrition was most often suggested (54.0%) as important topic for future research projects.

**Conclusion:** Patients with pancreatic disease, particularly with AP and CP reported pain, fatigue, and nutrition as most relevant problems. Two-third of patients with pancreatic disease are willing to participate in medical research. Most suggest nutrition as most relevant topic for future research.

#### EP02A-016

### THE VALUE OF A 24/7 ONLINE NATIONWIDE MULTIDISCIPLINARY EXPERT PANEL FOR NECROTIZING PANCREATITIS: A 5-YEARS' EXPERIENCE

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**Introduction:** Clinical decision-making regarding invasive interventions in patients with necrotizing pancreatitis can be extremely difficult. This is mainly due to the complexity of this disease and its relatively low incidence. To improve clinical outcome of these patients and to ensure high quality of nationwide randomized trials, we launched a 24/7 online nationwide pancreatitis expert panel, including surgeons, gastroenterologists, and radiologists. The current study aimed to evaluate the experience with this panel, with the emphasis on feasibility and accessibility.

**Methods:** From 2009 to 2014 we prospectively registered all cases evaluated by the expert panel, and requested all physicians who consulted the expert panel to fill out an evaluation.

**Results:** In total 397 cases were assessed by the expert panel, in 122 cases (31%) treatment advice was requested outside office hours. Time between onset of disease and the request for expert advice was median 26 days (IQR 16–46). In 133 cases (34%), patients were admitted on the ICU, and in 285 cases (72%) antibiotic treatment was already started prior to consultation. In 299 cases (75%) expert advices could be pooled and sent back to the physicians within 24 hours. In 157/397 cases (40%), the referring physician completed an evaluation. According to 148 physicians (94%) the expert panel was easily accessible and 138 (88%) considered it a valuable tool. In 132 cases (84%) the expert advice was followed.

**Conclusion:** A 24/7 online nationwide multidisciplinary expert panel for necrotizing pancreatitis is feasible, and considered an accessible and valuable tool for physicians treating these patients.

#### EP02A-017

### THE ROLE OF THE LIVER IN THE DEVELOPMENT OF RESPIRATORY FAILURE IN EXPERIMENTAL ACUTE PANCREATITIS (AP)

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**Introduction:** Multiple organ failure is the systemic most feared complication in AP and is associated with a high mortality. The acute respiratory failure is related to the infiltration of the lung alveolar wall by neutrophils and macrophages, due to the release of systemic mediators (TNF, MIP2). Our aim was to assess the role of the liver in the pathophysiology of the respiratory failure in AP by comparing 2 groups, with and without portocaval shunt.