2022nd Conference Pancreas 2018









3rd International Conference on

HEPATOBILIARY & PANCREATIC DISORDERS

September 17-18, 2018 | Philadelphia, USA

Poster Presentations

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Sociodemographic profile of pancreatitis patients in India

Shakshi Sharma, Sneha Tiwari, Shikha Prakash and Vaidya Balendu Prakash VCPC Research Foundation, India

Pancreatitis is rising exponentially in the world. Its etiology largely remains unknown. TIGAR-O factors (Toxins, Idiopathic, Genetic, Autoimmune, Recurrent and Obstructive) are the most accepted causes of the disease. It is reported that the Southern states of India have the highest incidences of Pancreatitis, ranging from 114-200/100,000 population. Rest of the Globe reports 1.6-27 cases per 100,000 populations. Alcohol and genetic factors are the most common aetiologies for Pancreatitis. A North India based ayurvedic clinic has collected details of age, sex, religion, caste, profession, native place, dietary habits and family history from 500 well-diagnosed patients of recurring acute, necrotizing, atrophic, genetic or chronic pancreatitis. These patients were enrolled in sequence from January 1997 to March 2018. Surprisingly, patients from the Northern states of India outnumber those from the Southern states. Similarly, incidences of pancreatitis were significantly higher among vegetarians, non-alcoholics, non-tobacco users and those with no previous family history. The male-female ratio was 4:1. Highest incidences were noted in the age group of nineteen to forty-five years. Interestingly, highest cases of Pancreatitis were reported among students/professionals of engineering, medical sciences and chartered accountancy. Hindu population showed more incidences in comparison to Muslims, Christians and others. A particular caste belonging to a business community (Agarwal, Marwari and Jain) had the highest cases of pancreatitis. A comprehensive survey with structured questionnaire should be carried to understand the magnitude of Pancreatitis in this region. An emphasis should also be made to explore more etiological factors.

Biography

Shakshi Sharma completed her Masters in Biotechnology at the age of 21 years from Graphic Era Deemed University, Dehradun, India. Since then she joined VCPC Research foundation as an Intern and has elevated to the position of Manager-Clinical Services. She is actively involved in the documentation of clinical practices of Ayurvedic physicians related to the treatment of patients diagnosed with recurring acute/ chronic pancreatitis and migraine without aura. She has been the coordinator of more than 12 training workshops on the preparation of herbo-minerals ayurvedic formulations and evidently effective ayurvedic treatment for a migraine. She has recently presented her first poster at a national scientific conclave on clinical research methodology in Ayurveda. That was entitled "Ayurvedic Physician versus Formulation Manager (A leap from Clinic to Market)". Besides she has attended numerous scientific conferences and seminars within India..

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Biliary cystadenoma—A tertiary care institute experience with special focus on intraductal biliary cystadenomas causing obstructive jaundice: Revealing the mystery of an unrevealed cause of biliary obstruction

Sowmya Jayachandran, Sugi Subramaniam, Thirumalaivasan Dhasakeerthi, P Ravichandran and S Jeswanth Govt. Stanley Medical College, India

Balance considered as a rare benign neoplasm of the liver with less than 200 cases being reported all over the world. We report a series of 12 cases highlighting the radiological findings and problems related to its management with a special focus on intrahepatic biliary cystadenomas; a very unusual benign cause of obstructive jaundice and their management. Records of 12 patients who underwent surgery for biliary cystadenomas, between 2013 and 2016, were reviewed and analyzed retrospectively. Of the 12 patients with biliary cystadenomas, three patients had features of obstructive jaundice in the absence of any other recognized cause of biliary obstruction. Majority of the patients were females. The most frequent symptom was an abdominal pain with obstructive jaundice seen in three patients. We had three patients who had protruding mass like lesion into the biliary tract causing obstruction to bile flow; who were managed with extrication of the growth along with enucleation/resection. There has been no recurrence during the follow-up period ranging from 6 months to 3 years. In patients with obstructive jaundice, especially middle-aged women, with the background of normal CA 19-9 levels and a polypoidal mass projecting into the bile duct lumen intraductal biliary cystadenomas should be considered as a possible diagnosis. If feasible limited resection of the cyst with extrication of this benign lesion with close follow up and frequent imaging of the liver is advisable to locate early recurrences if any.

Biography

Sowmya Jayachandran is currently a doctor and young clinical researcher. She has completed her medical education from country's acclaimed and finest medical schools- Government Stanley Medical College, India in 2017. She is passionate in Gastroenterology since the initial years of medical training. She works in collaboration with fellow residents and attending clinicians at Stanley for various clinical researches and pursuing options for residency in medical school.

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Accepted Abstracts

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Laser technologies and double balloon enteroscopy in surgery of chronic pancreatitis and mini-invasive treatment of its complications

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Again has more than 50% of patients. Modern techniques (Beger and its Bern modification, Izbicki) gives a high level of postoperative bleedings from pancreatic parenchyma. These procedures eliminate hypertension only in magistral pancreatic ducts. During January 2010–September 2017 we operated on 442 patients with ChP, including 330 resection – draining procedures (74,7%). In a randomized trial (62 laser resection vs 63 with electrocoagulation) we reduced the level of postoperative bleeding into the Roux loop in 4,7 times (1,2% vs 5,6%). We received evidence that besides the magistral, exista peripheral ductal hypertension due to tributaryliths. Latter had 17,8% of patients with ChP. For its elimination was proposed and carried out in 43 cases so-called "laser cylindric wirsung ectomy". For the first time in the world, we executed 26 antegrade DBE of pancreaticojejunostomy (PJA) lumen for diagnosis of complications after elective surgery of ChP and their mini-invasive treatment (laser vaporization of PJA strictures and lithotripsy). During the follow up (6 to 72 months) after the surgical treatment, 93,4% of patients remained pain-free.

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Management of pancreatico pleural fistula through minimally invasive approach: A case report

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The pancreaticopleural fistula is a rare complication of chronic pancreatitis. Patients usually present with respiratory discomfort symptoms. Therefore, diagnosis requires a high index of clinical suspicion in patients with chronic pancreatitis and present with recurrent pleural effusion. Analysis of pleural fluid for raised amylase will confirm the diagnosis and investigations like Computerised Tomography(CT), Endoscopic retrograde cholangiopancreatography (ERCP) or magnetic resonance cholangiopancreatography (MRCP) may establish the fistulous communication between the pancreas and pleural cavity. The optimal treatment strategy has traditionally been medical management with exocrine suppression with octreotide and ERCP stenting of the fistulous pancreatic duct. Operative therapy considered in the event patient fails to respond to conservative management.

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Persistent a	ctivation	of pancreatic	stellate cel	ls creates	a microen	ivironment	favorable	for the	malignant
behavior of	pancreati	ic ductal aden	ocarcinoma	ı					

Dona Tana

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Pancreatic ductal adenocarcinoma (PDAC) is one of the most common malignant tumors with poor prognosis due to extremely high malignancy, low rate of eligibility for surgical resection and chemoradiation resistance. Increasing evidence indicates that the interaction between activated pancreatic stellate cells (PSCs) and PDAC cells plays an important role in the development of PDAC. By producing high levels of cytokines, chemotactic factors, growth factors and excessive extracellular matrix (ECM), PSCs create desmoplasia and a hypoxic microenvironment that promote the initiation, development, evasion of immune surveillance, invasion, metastasis and resistance to chemoradiation of PDAC. Therefore, targeting the interaction between PSCs and PDAC cells may represent a novel therapeutic approach to advanced PDAC, especially therapies that target PSCs of the pancreatic tumor microenvironment.

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Electrochemotherapy in locally advanced pancreatic cancer: Preliminary results of a phase I/II study

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Objective: Report the preliminary results on electrochemotherapy (ECT) in the treatment of locally advanced pancreatic cancer of a phase I/II study and described the new functional imaging tools to assess ECT response in Magnetic Resonance (MR) imaging compared to morphological Computer Tomography (CT), ultrasound (US) without and with contrast enhancement (CEUS) and MR Imaging.

Materials and Methods: Thirteen patients were enrolled in an ongoing clinical phase I/II study approved by the Ethical Committee of National Cancer Institute G. Pascale Foundation - IRCCS of Naples. ECT with bleomycin was performed during open surgery. All patients underwent the US and CT scan, before and after ECT treatment; 7 patients were evaluated using morphological and functional (dynamic contrast enhancement-DCE and diffusion-weighted- DW) parameters in MR; 5 patients underwent CEUS. RECIST criteria were used to evaluate ECT response on US, CT and MR images. Functional parameters were also used to evaluate ECT response on MR images.

Results: No acute (intraoperative) and/or postoperative serious adverse events related to electrochemotherapy were observed; no clinically significant electrocardiographic, hemodynamic, or serum biologic changes were noted. No clinically relevant elevation of amylase or lipase levels was observed and no bleeding or damage to surrounding viscera occurred. In three patients had seen splenic infarction without thrombosis of the splenic vessels.

Conclusion: Electrochemotherapy is a feasible and safe treatment modality in patients with locally advanced pancreatic adenocarcinoma. Dynamic and diffusion MR imaging in comparison to MR morphological sequence alone and to UC and CT imaging is more suitable to assess ECT treatment response.

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Jan Csomor

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Drug-induced pancreatitis (DIP) is a rare variant of acute pancreatitis (an estimated incidence of 0.1-2 % of all pancreatitis). The true incidence of DIP is not known and evidence has mainly been derived from case reports and small case series. In fact, the true incidence of DIP is unclear because it may still be under recognized and under reported by clinicians and it is almost impossible to establish the clear relationship/causality between the drug and the disease. Over 100 drugs have been reported to cause acute pancreatitis in the scientific literature. Badalov et al. presented a classification system for drug-induced pancreatitis with five categories. The mechanisms by which drugs initiate a cascade of the destruction of the pancreas are unknown. In our presentation, we have a short theory and a data from our Internal clinic with patients with drug-induced acute pancreatitis (short case reports).

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Outcomes of chronic hepatitis B in a primary care setting

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Background: Although HBV infection is decreasing because of the implementation of HBV vaccination, chronic HBV is still one of the most predominant hepatitis. Chronic infection of HBV is one of the leading causes of cirrhosis, decompensated liver, hepatocellular carcinoma (HCC) and liver-related death. This is the first national study to evaluate the long-term outcomes of chronic HBV infection in a primary care setting.

Materials and methods: This is a retrospective cohort study. Data were collected retrospectively from the medical records of all patients who were diagnosed with hepatitis B and were seen in the Department of Family Medicine at KFSH&RC from January 2002 to March 2017. Data collection included hepatitis B serology, hepatitis B Detection and Quantitation, liver function test, liver ultrasound results, liver biopsy results and rates of HCC, cirrhosis and mortality.

Results: We found 50 patients diagnosed with hepatitis B. The mean age of included patients was 50 years with 72% male and 28 % female. The majority of our population were Saudi (90%). Among the included patients, (20%) have chronic hepatitis, while (80%) became chronic carriers. Genotype was done for 14% of included patients, genotype D (12%) was the predominant genotype followed by E (2%). Elevated liver enzymes were observed in (60%) of our population, liver cirrhosis developed in (16%), while (4%) of them developed HCC. The death occurred in (2%) of patients with non-liver related causes.

Conclusion: The prevalence of hepatitis B is dropping in our community. Our study showed that the majority of patients with chronic HBV became chronic carriers. Progression to Liver cirrhosis was modest and the development of HCC was relatively rare. Liver-related mortality rate was low.

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Alkaline phosphatase determinants of liver patients

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Objectives: Alkaline phosphatase is a well-known biomarker of liver disease. The article attempts to locate the determinants of alkaline phosphatase of some liver patients.

Background: Many previous research reports have considered alkaline phosphatase (ALP) as a continuous, homogeneous and Normally distributed response variable. In practice, ALP is positive, heterogeneous and non-Normally distributed response variable. There is a little study considering the real fact that the ALP as a non-Normal, heterogeneous and positive response variable.

Materials and Methods: The current report considers a real data set of 579 subjects with 9 continuous variables and 2 attribute characters. The considered data set was obtained from the North-East of Andhra Pradesh, India. The considered response ALP is positive, heterogeneous and non-Normally distributed continuous variable. So, it should be analyzed using statistical joint generalized linear Gamma or Log-normal models.

Results: The mean alkaline phosphatase (ALP) value is higher for the liver patients (P<0.001) than non-liver patients. The mean ALP value is high at senior ages (P=0.030) than the junior ages. The mean ALP decreases as the total bilirubin (TB) (P=0.006) increases, while it increases as the SGPT (P<0.001) increases. The mean ALP decreases as the albumin to globulin ratio (A/G) (P<0.001) increases. Interaction effect of age with total bilirubin (TB) (Age*TB) (P<0.001) is directly correlated with the mean ALP, while the joint interaction factor of age with total proteins (TP) (Age*TP) (P=0.010) is inversely correlated with the mean ALP. Again, the interaction effects of albumin to globulin ratio (A/G) with the total bilirubin (TB) (A/G*TB) (P<0.001) and with total proteins (TP) (A/G*TP) (P=0.003) are directly correlated with the mean ALP. The variance of ALP is higher for liver patients (P<0.001) than non-liver patients. The variance of ALP increases as the SGPT (P<0.001), or total bilirubin (TB) (P=0.088) increases. The variance of ALP increases as the albumin to globulin ratio (A/G) (P<0.001), or age (P=0.055) decreases.

Conclusions: The response alkaline phosphatase (ALP) is identified as heterogeneous and Lognormally distributed. Many factors such as age, SGPT, interaction effects of albumin to globulin ratio with total bilirubin and separately with total proteins and also the interaction effect of age with total bilirubin are directly correlated with the mean ALP. The present findings, especially the interaction effects and the variance determinants of ALP are completely new inputs in the liver disease literature.

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Mechanistic modeling: The pathway to precision medicine

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There are a growing and critical need for integrating molecular systems science with computation to model complex disease processes for accelerating drug discovery, drug repurposing, validation of complementary and alternative medicine (CAM) therapies and identification of efficacious multi-combination therapeutics while ensuring a personalized and precise medicine. Such needs cannot be advanced without collaborative integration of knowledge across biological disciplines. This talk will share the recent successes, through multiple case studies, in the use of CytoSolve, a computational systems biology collaboratory, developed at M.I.T., that provides an integrative approach to address these critical needs. Previous approaches, largely based on statistical techniques, have been unscalable and largely useless to scientists who seek to understand complex biological mechanisms. CytoSolve's successes have been published in peer-reviewed journals and have received recognition in Nature for its potential to develop multicombination therapies. These successes including: FDA allowance for a multi-combination pancreatic cancer therapeutic; the Department of Defense (DoD) and the United States Pharmacopeia (USP) understanding of toxicity and adverse reaction multicombination nutritional supplements; and, modeling of rare diseases in orphan drug domains such as Neuromyelitis Optica (NMO) and Hereditary Angioedema (HAE) have inspired major nutraceutical researchers, cancer centers such as MD Anderson, National Cancer Institute and others to explore the use of CytoSolve for integrating CytoSolve's collaboratory with modern *in vitro* and *in vivo* methods to accelerate the development of multi-combination therapeutics. This talk that will provide an introduction to a disruptive platform that will likely revolutionize the development of therapeutics in the 21st century.

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Transabdominal sonography of the gall bladder & its hepatic & peritoneal perforations

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Transabdominal Sonography of the Gall Bladder can reveal Hepatic & Extrahepatic & Peritoneal Perforations of the Gall Bladder, whether it is impending perforations, frank perforations, sealed perforations, concealed perforations & its complications. It can also demonstrate adhesions in the Gall Bladder Fossa at the Right Upper Quadrant. All these cases are compared & proved with gold standards like Laparoscopic & Open surgery & endoscopy. Some extra efforts taken during all routine or emergent ultrasonography examinations can be an effective non-invasive method to diagnose primarily hitherto unsuspected Gall Bladder impending perforations, frank perforations, sealed perforations, concealed perforations & its complications, so should be the investigation of choice.

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