

REPLY

Reply to “Comments on the Article: Management of Suspected Acute Inflammatory Pancreatopathies in a "Real-World" Setting - A Single-Centre Observational Study”

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Dear Sir,

we appreciated Dr. Goyal for reading our paper “Management of suspected acute inflammatory pancreatopathies in a "real world" setting: a single-centre observational study” [1].

We also feel that Dr. Goyal attained perfectly our own conclusions [2].

The term suspected has been used in relation to the initial diagnosis. This is a well established and standard procedure in medical work up: “first comes the suspect then the diagnosis”. The diagnosis of “acute pancreatitis” was done by DEA. From that point we start our work up! At the end of the procedures this diagnosis was confirmed in 112 patients. Then the term suspected is justified in the title; in addition this term was suggested by one of the referee, and we accepted the suggestion. And also the title was accept by the Editorial Board of the Journal and published.

Quoting “Classification of acute pancreatitis 2012: revision of the Atlanta classification and definitions by international consensus” [3] it is stated that the diagnosis of acute pancreatitis requires two of the following three features: 1) abdominal pain; 2) serum lipase activity (or amylase activity) at least three times greater than the upper limit of normal; and 3) characteristic findings of acute pancreatitis

on contrast-enhanced computed tomography (CT scan) and less commonly magnetic resonance imaging (MRI) or transabdominal ultrasonography. So, in our sample, all patients “fulfilled the Atlanta criteria”.

About the imaging diagnosis in part the answer is in the first point. In fact, 61 patients did CT scan, 50 underwent abdominal MRI and 97 did abdominal ultrasound. So, all patients made at least one of the diagnostic imaging required by the guidelines. For us too, this represents a point to be approaches. We would like to remember that this is a “real world” study, so these findings must be considered like “real”.

We thank a lot for considering our paper.

Comment

I would like to thank Dr. De Nuzzo for answering all my questions and clearing my doubts about this study. I understand that this study tells us about the real life management of acute pancreatitis and many of these patients underwent more than one imaging study during their hospitalization. I would like to reiterate as this study is about the confirmed cases of acute pancreatitis as per Atlanta Criteria so the study title should not have the word “suspected” in it.

Hemant Goyal, MD

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References

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