

AB125. P101. Recurrence and survival after surgery for pancreatic cancer with or without acute pancreatitis

Yonghua Chen, Keyu Li, Xubao Liu

West China Hospital, Chengdu 610041, China

Background: In pancreatic cancer, acute pancreatitis is a serious morbidity, but its negative effect on long-term outcome remains to be elucidated. The aim of this study is to determine the impact of acute pancreatitis on recurrence pattern and long-term survival after surgery for pancreatic ductal adenocarcinoma.

Methods: The medical records of 219 patients with curative pancreatectomy for pancreatic cancer were reviewed. The severity of acute pancreatitis was classified according to the Atlanta classification of acute pancreatitis. Early recurrence was defined as relapse within 12 months after surgery. Overall and disease-free survivals and recurrence patterns were analyzed. Mild acute pancreatitis was excluded because

the negative effects can be negligible.

Results: Moderate or severe acute pancreatitis was an independent risk factor for early recurrence (odds ratio =4.13; 95% confidence interval, 1.41–12.10; P=0.001). According to the analysis of disease-free survival in patients with recurrence, Median time to recurrence was shorter in patients with acute pancreatitis than in those without (8.4 *vs.* 12.8 months; P=0.003). Multivariate analysis identified acute pancreatitis as an independent prognostic factor for Overall survival (hazard ratio 2.33; 95% confidence interval, 1.44–3.79) and disease-free survivals (hazard ratio =2.43; 95% confidence interval, 1.46–4.07) in patients with pancreatic ductal adenocarcinoma.

Conclusions: Patients with moderate or severe acute pancreatitis developed recurrence earlier than those without. Moderate or severe acute pancreatitis adversely affects the overall and relapse-free survival of patients with pancreatic ductal adenocarcinoma.

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