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Summary

TRANSFORMING THE MANAGEMENT OF SEVERE ACUTE PANCREATITIS: A MULTIDISCIPLINARY TEAM'S IMPACT ON INTERVENTIONAL ENDOSCOPY TIMING AND FOLLOW-UP AT A TERTIARY HPB CENTRE

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Pancreas

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A retrospective cohort study found that implementing a multidisciplinary team model for severe acute pancreatitis at a tertiary centre reduced intervention waiting times, hospital stays, and follow-up intervals compared to standard care.

KEY POINTS

- The study compared 191 patients managed before MDT implementation (January 2022–January 2023) with 76 patients managed after MDT implementation (November 2023–March 2024) at a hepato-pancreato-biliary centre.
- Median time from admission to inpatient endoscopic intervention decreased from 13.0 days pre-MDT to 6.5 days post-MDT, with all post-MDT inpatients receiving procedures within the first week.
- Median hospital stay was reduced from 8 days to 5 days, and the proportion of inpatients discharged within the first week post-intervention increased from 30% to 71.4%.
- Average clinic follow-up time decreased from 169 days pre-MDT to 43 days post-MDT, and 68% of patients received outpatient endoscopy within six weeks post-discharge in the MDT cohort.
- The material is most relevant to clinicians and administrators involved in acute pancreatitis care pathways and multidisciplinary team development.

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