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GASTRIC ACIDITY FOLLOWING LONGITUDINAL PANCREATICOGASTROSTOMY

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34 patients were investigated who were operated for chronic pancreatitis. A longitudinal pancreaticogastrostomy was applied for relief of symptoms in all cases.

The question was, whether the pancreatic juice released into the stomach have any effect on gastric acidity.

A 24 hour gastric pH monitoring was performed on every patient before and 6 weeks after the operation.

Following a complete postoperative check-up we found that 33% of the patients had no digestive problems with pancreatic enzyme substitution. The average postoperative weightgain was 3.8 kg. The number of diabetic patient increased from 9 to 12.

According to our statistical evaluations of 24 hour gastric pH monitoring test no alternation was detected in gastric pH level postoperatively.

We have found that the pancreatic pressure which has been the main cause for pain can be relieved by pancreaticogastrostomy.

On the bases of our result we can consider the pancreaticogastrostomy as an operation choice to relieve intractable pain in most patients with chronic pancreatitis associated with duct dilatation.