

## Complicated pancreatitis: a rare complication following scoliosis surgery- Barbara Dolaszynska- Newcastle University

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Acute and chronic pancreatitis post scoliosis correction surgeries have been reported before as a rare complication. Many hypothesis were suggested before, one of them proposed direct trauma, other included waves generated by the high speed drilling. Re-alignment of the spine after the surgery was also hypothesized. In all the cases reported before there was an element suggesting those hypotheses. In this case, there was no evidence that the pancreatitis is caused by the spinal surgery at all. Fourteen year old girl admitted for elective scoliosis surgery for cerebral palsy was post operatively unwell, with rising C-reactive protein (CRP) and an increasingly distended abdomen. CT of the abdomen was performed and showed some free fluid but no free gas. Diagnostic laparoscopy was performed due to the failure of conservative management. This showed extensive inflammation of the right side of the colon,

adherent to the bowel and that led to laparotomy and extended right hemicolectomy and ileostomy formation. Pathology samples sent in which showed manifestations of pancreatitis. The histology macroscopy report of the biopsy samples showed congested and oedematous serosa with adhesions and patchy fibrinopurulent exudate extending along almost the entire length of the specimen (right hemicolectomy). Imaging reviewed and revealed that the pancreas and transverse colon is a long way away from the spine or trajectory of the screws. Spinal fusion for severe neuromuscular scoliosis is a difficult procedure, with a high rate of complications. Among them, pancreatitis should be considered when abdominal pain persists in the postoperative period. Early diagnosis and management would always improve the outcome in such cases.