Your guide to...

Understanding pancreatitis

1. What is pancreatitis?

Pancreatitis is inflammation of the pancreas.

Generally, it falls into two types:

- **Acute pancreatitis**
- **Chronic pancreatitis**



Pancreatitis at a glance: key differences

Feature	Acute pancreatitis	Chronic pancreatitis
Onset and nature	Short-term, sudden inflammation. 21 out of 100 adults experience another episode (recurrent pancreatitis). Some may also develop chronic pancreatitis.	Long-term, continuous or recurrent inflammation.
What happens	Begins in the cells that produce digestive enzymes, leading to acute swelling and tissue damage.	Healthy, soft pancreas tissue turns hard, knobbly and scarred (fibrotic) over time.
Main causes	8 in 10 cases are caused by gallstones or drinking too much alcohol.	7 in 10 cases are linked to drinking too much alcohol.
Genetics and other causes	Rare: Can be linked to genetic conditions causing high blood fats (hypertriglyceridemia), rare structural variations (e.g. pancreas divisum) and other causes.	Significant role: Often a combination of genetic genes (like the cystic fibrosis gene or hereditary pancreatitis genes) and environmental triggers.
Unexplained (idiopathic)	1 in 10 cases have no clear known cause.	Up to 3 in 10 cases have no clear known cause.
Long-term damage	79 in 100 adults fully recover and never experience another episode.	Structural damage is irreversible and gets progressively worse over time.

2. Symptoms and diagnosis

Acute pancreatitis

Symptoms include:

- Sudden, severe abdominal pain (often radiating to the back).
- Feeling sick (nausea).
- Being sick (vomiting).
- Fever and a high heart rate.

Diagnosed by:

- Blood tests (checking for elevated amylase and lipase levels).
- Imaging scans (such as an ultrasound, a CT scan or MRI scan).

Chronic pancreatitis

Symptoms include:

- Upper abdominal pain (often radiating to the back).
- Feeling sick (nausea).
- Being sick (vomiting).
- Diarrhoea (often oily, floating and pale).
- Weight loss.
- Generally feeling unwell, lethargy and fatigue.

Diagnosed by:

- Hospital scans.
- Poo (stool) tests.



3. Possible complications

Acute pancreatitis

- **Pseudocysts**

Fluid-filled collections can form around the pancreas during recovery, which can require monitoring and draining.

- **Necrotising pancreatitis**

In severe attacks, large parts of the pancreatic tissue die due to inflammation.

- **Recurrent attacks and diabetes**

21 out of 100 adults experience another episode (recurrent pancreatitis). Some may also develop chronic pancreatitis. About 1 in 5 people who have severe acute pancreatitis go on to develop diabetes.

- **Organ failure**

1 in 4 people may experience problems with other organs, particularly kidney failure or lung damage. This often requires High Dependency (HDU) or Intensive Care (ICU).

Chronic pancreatitis

- **Pancreatic Exocrine Insufficiency (PEI)**

8 in 10 people with chronic pancreatitis develop PEI. This is where the pancreas no longer produces enough enzymes to break down and absorb nutrients.

- **Diabetes**

Between 25 and 80 out of 100 people develop diabetes within 10 to 20 years because insulin-producing cells are damaged.

- **Duct blockages and stones**

Scar tissue can narrow the pancreatic ducts and form large protein plugs or stones, increasing pain and pressure.

- **Nutritional deficiencies and weight loss**

Poor digestion leads to vitamin/mineral deficiencies, weakened bones, malnutrition and significant weight loss.



4. Management and prevention

Acute pancreatitis

Treatment focuses on supportive care in hospital, including fluids and oxygen. Stronger painkillers may also be required. For more severe cases, treatment such as tube feeding and investigations for gallstones may be needed.

Prevention:

To prevent future attacks, it is vital to completely stop drinking alcohol and quit smoking as both damage the pancreas.

You don't have to do it alone. Ask your doctor about alcohol and stopping smoking services in your area.

Chronic pancreatitis

Treatment focuses on long-term symptom control, pain management, enzyme replacement therapy (PERT) to aid digestion and monitoring.

Slowing progression:

It is vital to completely stop drinking alcohol and quit smoking to slow down irreversible tissue damage and further progression.



Learn more and take action

Guts UK is the only charity funding a research fellowship into pancreatitis.
Our digestive systems have been underfunded and misunderstood for decades. We're here to change that.

Download resources

Head to gutscharity.org.uk/kranky-panky to download our free, reliable resources and learn more about pancreatitis.

Join us on socials

Search @gutscharityuk on social media to join the #KrankyPanky campaign.

Support our work

Donate today at gutscharity.org.uk/donate to help improve the lives of millions affected by digestive conditions and symptoms like pancreatitis.

Need more information on your digestive condition or symptoms?
Guts UK is the national charity for the digestive system. For information and guidance, go to **gutscharity.org.uk/information.**

Need support? Contact our Helpline on 0300 102 4887 or gutscharity.org.uk/helpline.

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