

Pancreaticopleural Fistula: A Rare Complication of Acute Pancreatitis

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INTRODUCTION

- Pancreaticopleural fistula (PPF) is an unusual complication associated with several risk factors such as splenectomy, abdominal trauma, and chronic pancreatitis.
- PPF can leak pancreatic fluids into the pleural cavity through a tract and subsequently cause infection and other complications.
- Diagnostic timing is key in reducing hospital stays and avoiding unnecessary surgical interventions.
- We present a case of unrecognized PPF after a fall and trauma to the abdomen which due to delayed diagnosis and intervention led to a complicated course with infection of the pleural cavity.

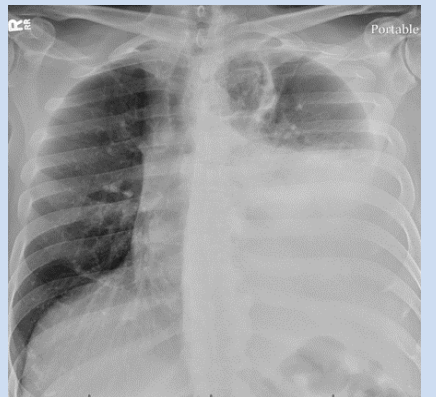


Figure 1: Chest x-ray showing large left-sided pleural effusion with adjacent consolidation and tracheal deviation to the right.

CASE PRESENTATION

- 62-year-old male with a history of previously treated tuberculosis, severe persistent asthma, and hypertension who presented two weeks after a 3-foot fall from a ladder with left-sided chest tightness and shortness of breath.
- A large left-sided pleural effusion was seen on the chest radiograph (Figure 1).
- Thoracentesis demonstrated an exudative effusion with a high amylase content.
- Computer Tomography (CT) of the chest and abdomen was suggestive of a PPF (Figure 2).
- Endoscopic retrograde cholangiopancreatography (ERCP) confirmed the PPF (Figure 3 & 4) which was successfully treated with stent placement (7Fx11).
- Repeat ERCP in 6 weeks showed resolution of the PPF, and the patient was found to have no further pleural effusion on repeat chest CT imaging 6 months later.

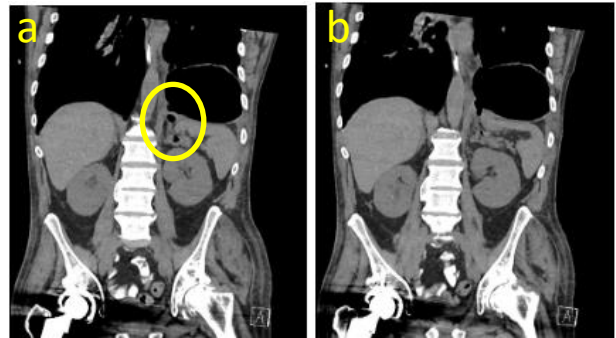


Figure 2a: CT Chest/abdomen illustrates the tract of the fistula forming from the diaphragm. **Figure 2b:** Demonstrates the continuation of the tract into the pancreas.



Figure 3: ERCP showing contrast extravasation into the pleural cavity.



Figure 4: ERCP demonstrating minor papillotomy done and a 7Fr x 11 cm pancreatic stent placed into the dorsal pancreatic duct.

DISCUSSION

- Trauma to the pancreas has been reported to be associated with high morbidity and mortality.
- PPF is a complication that, although rarely seen, needs to be thought of in the proper clinical setting and followed by early endoscopy to avoid prolonged hospitalization and unnecessary surgical interventions.
- In this case, we present a patient who developed PPF secondary to trauma with posterior pancreatic duct disruption and tracking to the pleura most likely via the esophageal hiatus.

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