Chirurgia (Bucur). 2014;109(1):123-127

A Case Report of Pancreatic Transection by Blunt Abdominal Trauma

V. Brașoveanu[1], I. Bălescu[2], C. Anghel[1], I. Barbu[1], M. Ionescu[1], N. Bacalbașa[3]
[1]Department of General Surgery and Liver Transplantation "Dan Setlacec", Fundeni Clinical Institute, Bucharest, Romania
[2]"Ponderas Hospital" Bucharest, Romania
[3]"Carol Davila" University of Medicine and Pharmacy, Bucharest, Romania

Abstract
Posttraumatic pancreatic rupture is associated with high morbidity and mortality. Various management strategies are described, but due to the relative rarity of this pathology no standards exist. We reported a 21 years old male with post-traumatic complete rupture of the pancreatic isthmus, devascularization lesion of descending duodenum, right renal artery posttraumatic thrombosis and left lobe of the liver laceration. Laparotomy for hemostasis was initially performed in a different hospital and the patient was then referred to us. Pancreaticoduodenectomy and right nephrectomy were performed. Postoperatively the patient had a pancreaticojejunal anastomosis fistula spontaneously resolved at 45 days. Pancreaticoduodenectomy can in selected cases be a solution in pancreatic trauma.
Key words: pancreatic transection, trauma, pancreaticoduodenectomy, late complications

Corresponding author: Nicolae Bacalbașa, MD
Dimitrie Racoviță Street, no. 2, Bucharest, Romania
E-mail: nicolaebacalbasa@gmail.com