

EXAMPLES OF PRACTICE

**2 Patients
1 cancer
2 Endings**

**Helen Upfold
MACMILLAN
Upper GI CNS**

Claudia



Patient 1

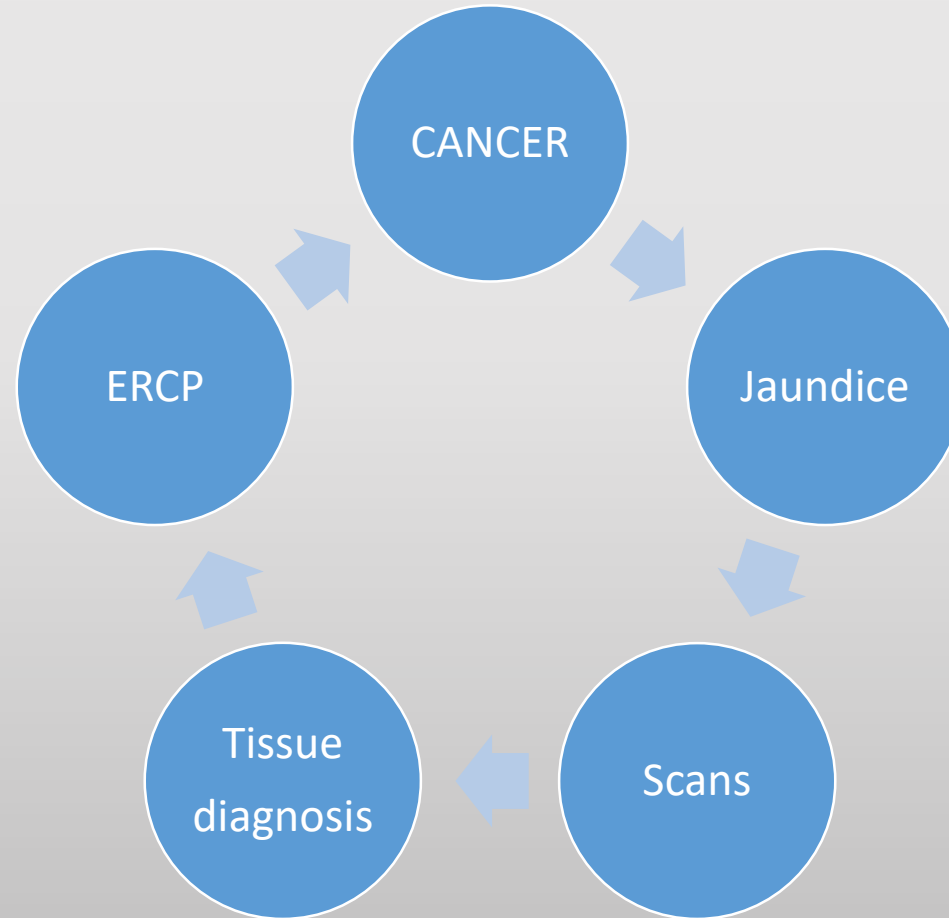
- **72 year old lady; main carer for husband who had a stroke.**
- **PMH – Essential Tremor.**
- **Presenting Symptoms – Painless Jaundice.**

Nausea.

Itch.

Dark Urine.

Words!!



CT SCAN

22nd April 2020

There is dilatation of the biliary tree for which there is no apparent cause. No other abnormality demonstrated, in particular no evidence of aortic dissection.

Investigations

1st May 2020

- **USS**

Intra hepatic and pancreatic dilatation with suspicion of mass at pancreatic head.

- **MRI Scan**

Biliary obstruction. Double duct dilatation(biliary and pancreatic duct) with abrupt cut off in CBD. Appearances are highly suggestive of malignant stricture and mass in the region of the distal CBD/pancreatic head.

- **CT scan**

The overall appearances most likely represent a pancreatic malignancy.

LFT'S

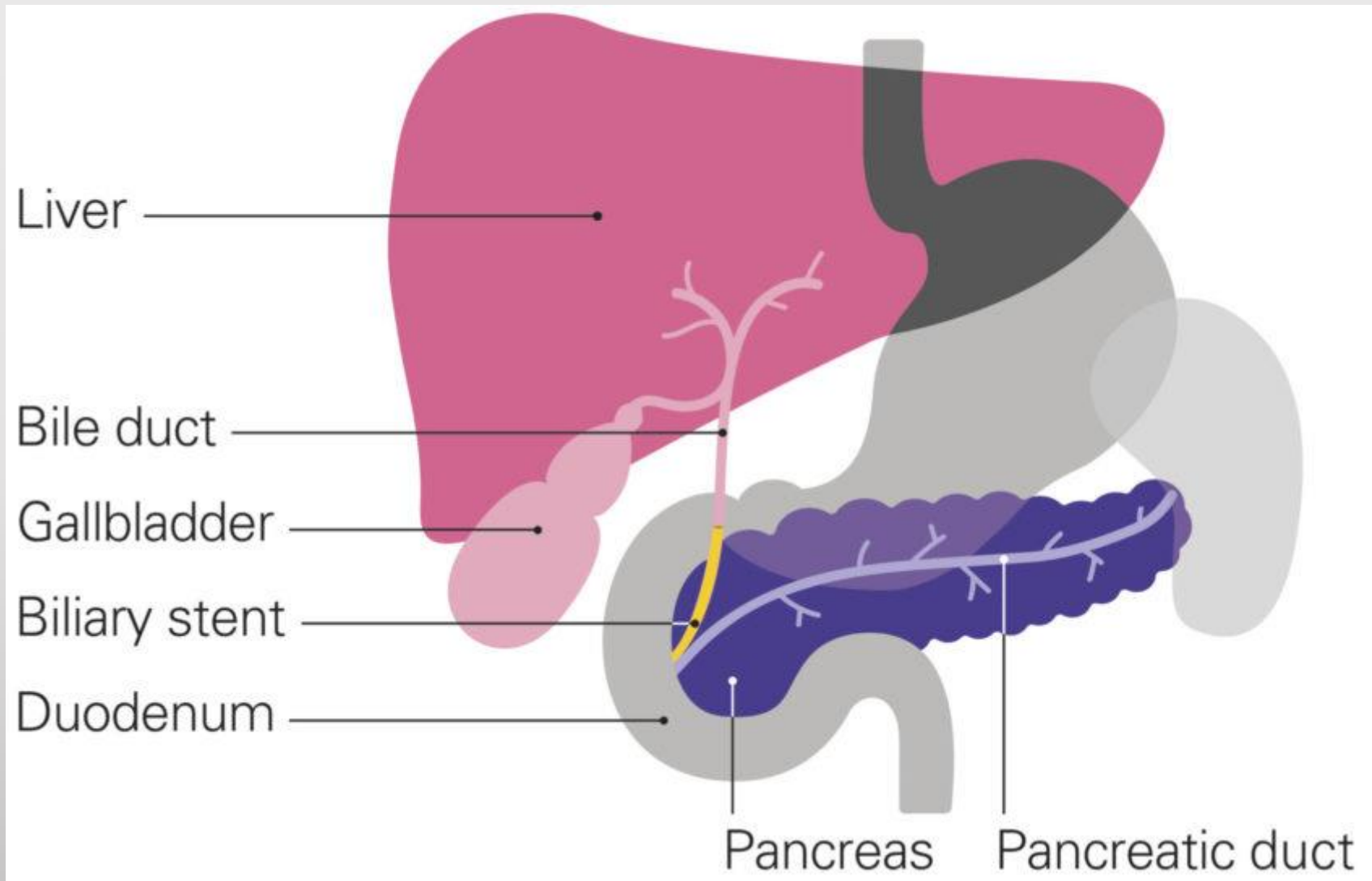
	<i>1/5</i>	<i>5/5</i>	Normal Values
• Bilirubin	98	138	0 - 21umol/LR
• Alk. Phosphatase	1261	965	30 - 130U/LR
• ALT	147	123	0 - 55IU/LR
• AST	123	130	0 - 45U/LR
• Total Protein	66	59	60 - 80g/L
• Albumin	39	35	35 - 50g/LNo

**Endoscopic Retrograde
Cholangio-pancreatography**

To relieve me!

ERCP
**put me back in
the pink!**

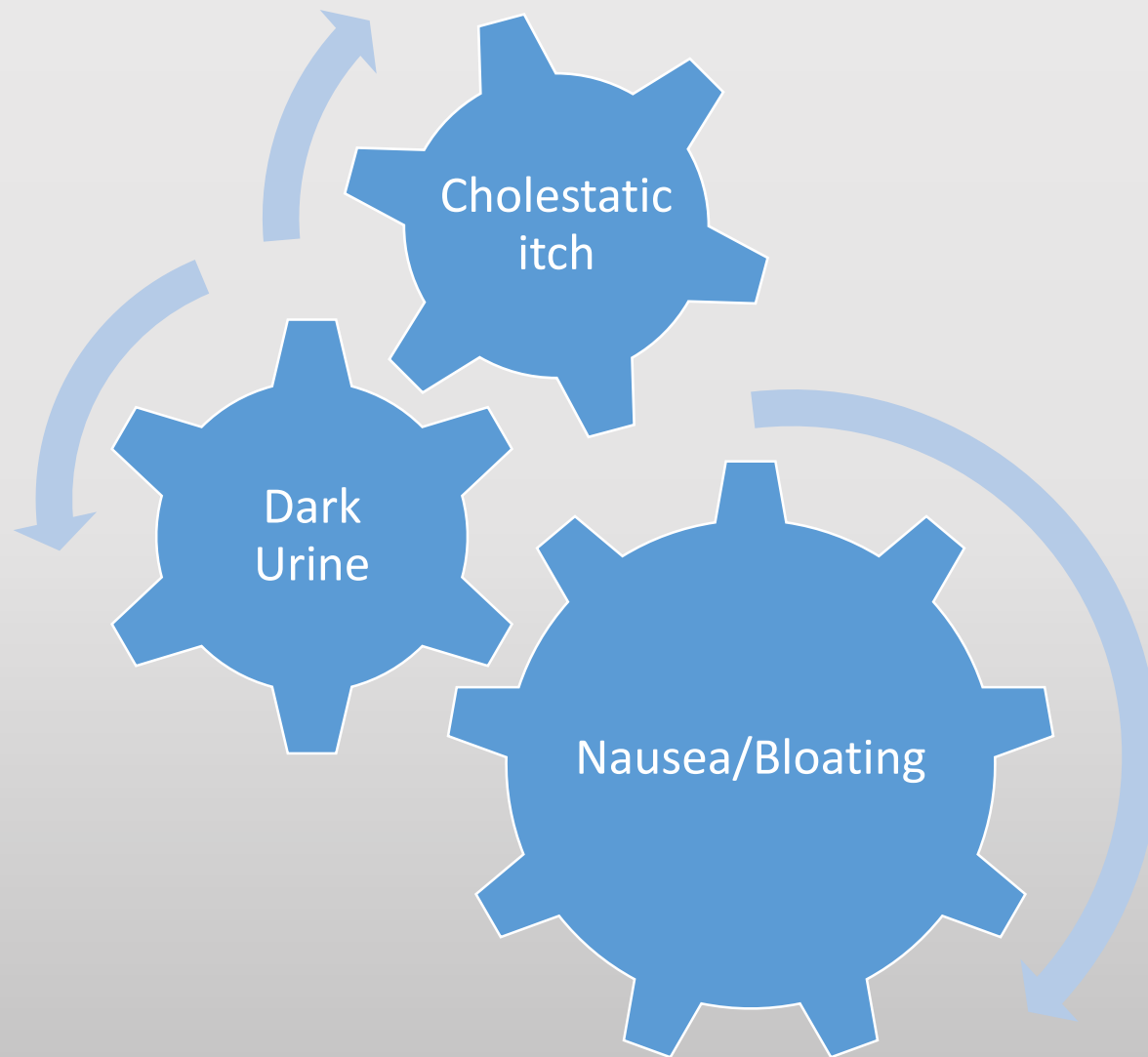
Pancreatic Cancer UK



SNEEKY



Claudia's
symptoms



- **Cholestasis**

In cholestasis there is no evidence of one drug being more effective than another so the choice will depend on individual circumstances and local guidance

- **Rifampicin**

300mg to 600mg once daily

- **Sertraline**

50mg to 100mg once daily

- **Cholestyramine** 4g up to four times daily

Creon FVRH Protocol



25,00units

Take Capsule with snacks

Two Capsules during Breakfast and
Lunch

Three Capsule with evening Meal

The bigger the meal the more you
creon you need!

LFT'S

24 hours Post ERCP

• Bilirubin	79	0 - 21umol/LR
• Alk Phosphatase	838	30 - 130U/LR
• ALT	110	0 - 55IU/LR
• AST	81	0- 45U/LR
• Total Protein	59	60 - 80g/LR
• Albumin	35	35 - 50g/L

Drugs on discharge

- **Co-codamal 30/500mgs PRN**
- **Omeprazole 20mgs BD.**
- **Creon as per Protocol.**
- **Aqueous and menthol emollient (Dermacool) – x4 per day.**

Keith



Patient 2

- 52 year old gentleman.
- Normally fit and well with No PMH.
- Presented to GP on 15th October 2020 for advice on erectile dysfunction.
- Found to be hypertensive and jaundiced.
- Deranged LFT's.
- Asked to attend FVRH next day.

LFT'S

15/9

Normal Values

• Bilirubin	80	0 - 21umol/LR
• Alk. Phosphatase	447	30 - 130U/LR
• ALT	1131	0 - 55IU/LR
• AST	228	0 - 45U/LR
• Total Protein	71	60 - 80g/L
• Albumin	41	35 - 50g/LNo

16th October 2020
USS

- Liver contains multiple well-defined hypoechoic areas within it. There are also larger hypodense sections within the right lobe.

Malignancy cannot be excluded.

19th October 2020
CT Scan

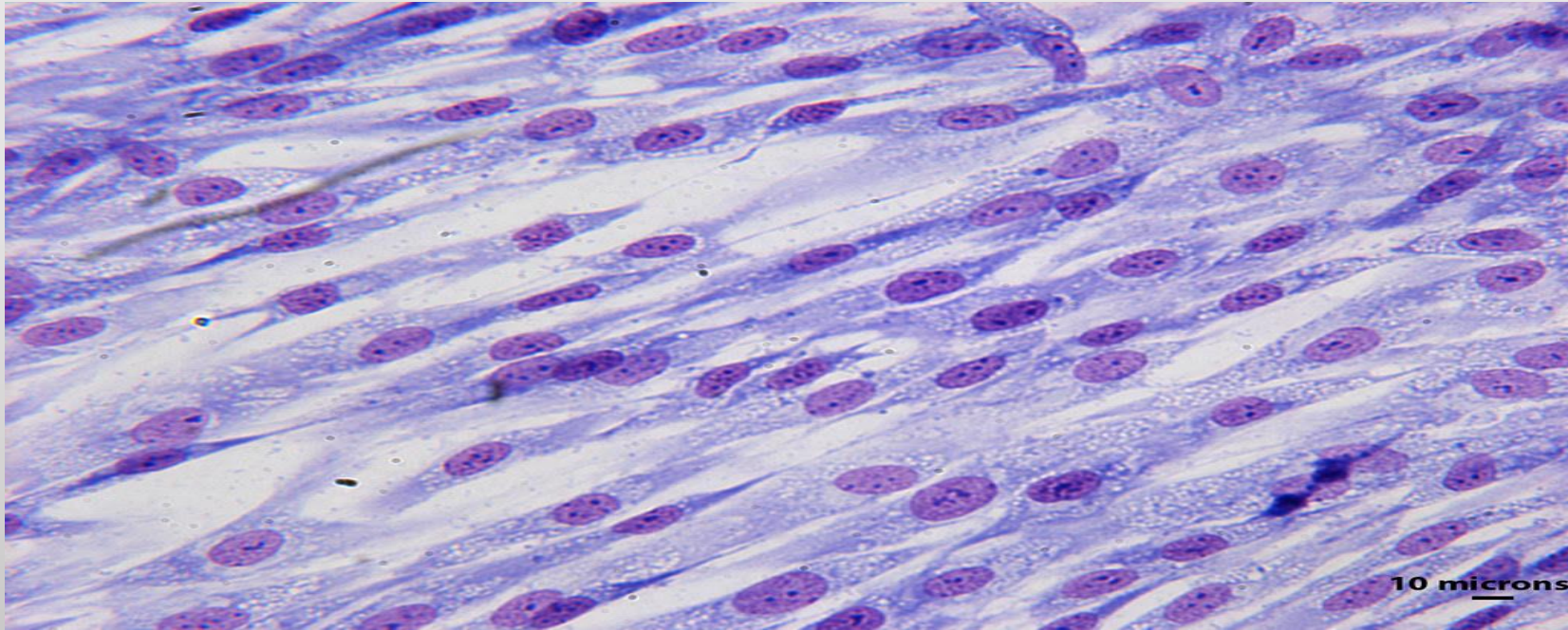
- Acute right lower lobe pulmonary embolism. Subtle lesion within the head of the pancreas, presumed to be primary malignancy.
- Metastatic disease to the liver and lungs. Local nodal disease.

Pancreatic Cancer UK

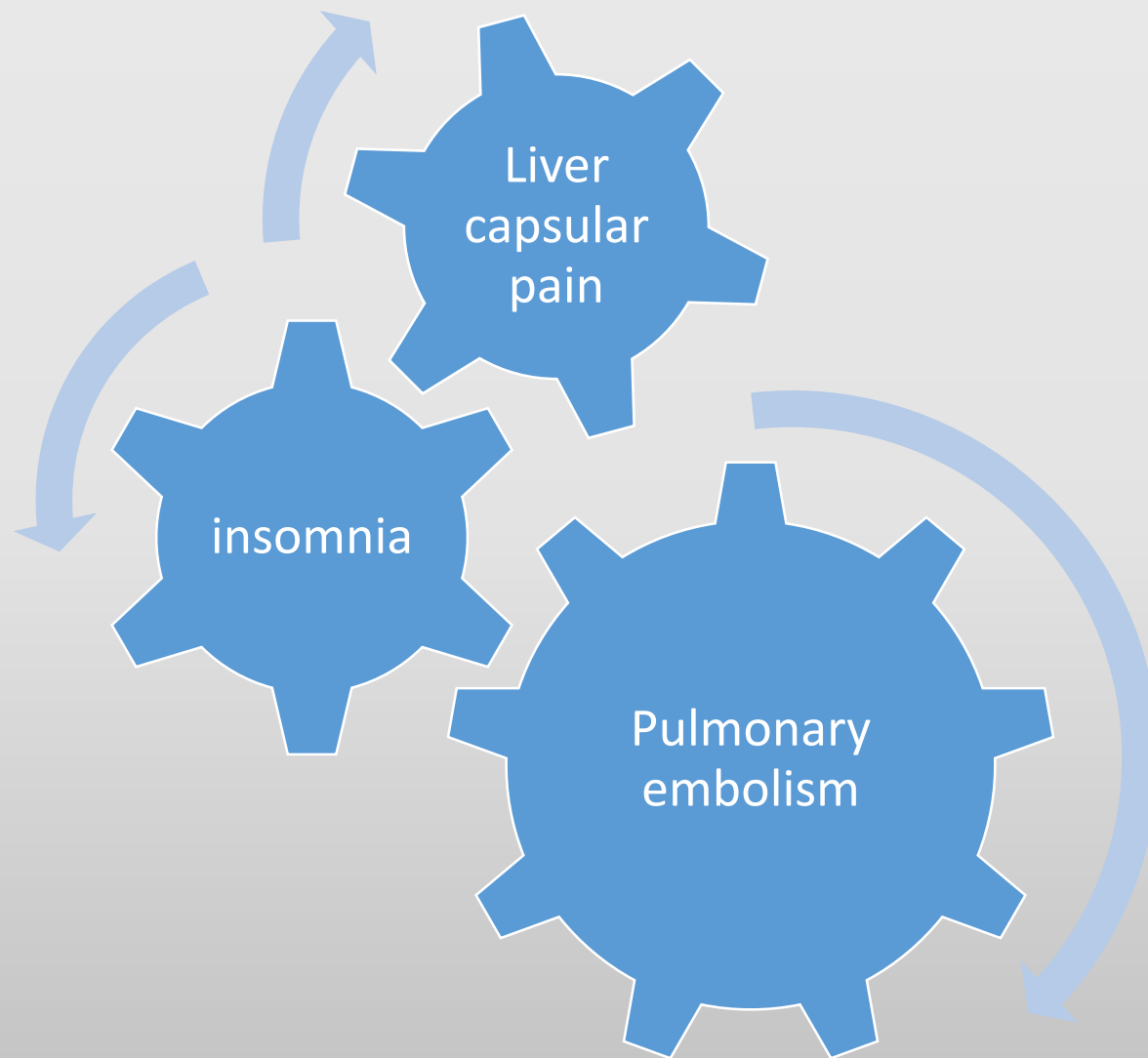


Liver

For tissue analysis biopsy



Keith's
Symptoms



MEDICATIONS

- Enoxaparin 100mgs per kg BD for 5 days and then 150mgs per kg daily thereafter.
- Creon as per PERT protocol.
- Omeprazole 20mgs BD.
- Morphine Sulphate elixer (oramorph) 2mgs PRN.
- Dexamethasone 4mgs daily (post biopsy)
- Zopicolone 3.75mgs at night

LFT'S

25/09

Normal Values

• Bilirubin	381	0 - 21umol/LR
• Alk. Phosphatase	473	30 - 130U/LR
• ALT	236	0 - 55IU/LR
• AST	133	0 - 45U/LR
• Total Protein	62	60 - 80g/L
• Albumin	35	35 - 50g/LNo

Keith

15/09/20 - 04/12/20