



## PANCREATITIS

### ABOUT THE DISEASE

**What it is:** Inflammation of the pancreas—an organ that makes insulin (for blood sugar control) and digestive enzymes (to break down food). It hits suddenly (acute) or lingers on/off (chronic), causing body-wide symptoms. Enzymes meant for the gut leak early inside the pancreas, literally "digesting" it. This sparks severe swelling that can spread to liver, intestines, and beyond.

**Common triggers:** Often from fatty treats like cheese, bacon scraps, fast food, or greasy table scraps. Patients with diabetes or hypothyroidism are higher risk. Sometimes no clear cause.

#### Signs to spot—call vet ASAP:

- **Mild/early:** Belly pain (hunched posture, sensitivity), vomiting, diarrhea, no appetite, fever.
- **Severe (emergency):** Weakness, shock, clotting issues, collapse—can be fatal without fast care.
- Acute: Hits hard and fast. Chronic: Comes/goes over weeks/months, sneaky.

Watch diets strictly—no human fatty foods. If symptoms pop, don't wait; blood tests confirm it. Early IV fluids/hospital care saves lives.

### OBTAINING A DIAGNOSIS

**Initial Suspicion:** Often based on history, especially recent fatty food ingestion (e.g., table scraps).

#### Confirmation Tests:

- **Blood Tests (Primary Method):**
  - **cPL (Canine Pancreatic Lipase):** Most reliable—measures a specific pancreatic enzyme elevated in pancreatitis.
  - **Amylase & Lipase:** Less specific; can rise from other gut issues.
  - **Routine Bloodwork:** Checks for complications like dehydration, organ stress, or underlying conditions (e.g., diabetes).
- **Imaging:**
  - **Abdominal Ultrasound:** Best for visualizing pancreas inflammation or changes.
  - **X-rays:** Sometimes useful for severe cases or ruling out other issues.

### TREATMENT

**No Specific Cure:** Focuses on hydration, pain relief, and managing symptoms (e.g., nausea, vomiting).

#### Acute Care Options:

- **Mild Cases:** Outpatient management with take-home medications (anti-nausea, pain control).
- **Severe Cases or Failed Outpatient:** Hospitalization for:
  - IV fluids to correct dehydration.
  - Injectable medications for pain and support.
  - Monitoring vital signs and complications.

#### Long-Term Prevention:

- Switch to a low-fat prescription diet (vet-recommended brands like Hill's i/d Low Fat).
- Avoid fatty foods/holiday hazards to reduce recurrence risk.

Monitor appetite/vomiting; follow diet strictly. Prognosis good with prompt care.

### TIPS FOR SUCCESS

- Diet is key – low fat food for life, no treats, table scraps, or people foods
- Acute cases often become chronic, watch for a recurrence of symptoms