

中文題目：消化道出血對急性胰臟炎患者預後之影響-全人口資料庫研究

英文題目：The Effect of Gastrointestinal Bleeding on Outcomes of Patients with Acute Pancreatitis: A National Population-Based Study

作者：沈修年^{1,3} 呂瑾立^{2,3} 李中一³

服務單位：財團法人台南奇美醫學中心 加護醫學部¹ 醫學研究部² 成功大學 公共衛生研究所³

Background: The effect of gastrointestinal bleeding (GIB) on the risk of death in patients with acute pancreatitis (AP) has not been specifically examined. We aimed to investigate the adverse effects of GIB and organ failure (OF) separately and jointly in AP patients.

Methods: We analyzed 107,349 patients with first-attack AP from the Taiwan National Health Insurance Research Database between 2000–2009. Patients were categorized into four groups according to the status of GIB and OF, the effect of which was assessed using multivariable analyses with generalized estimating equations models. Primary outcomes were 14-day and hospital mortality. Secondary outcomes were septic complication and prolonged hospital stay (>18 days).

Results: The covariate adjusted odds ratio for 14-day mortality, hospital mortality, septic complication, and prolonged stay all significantly increased at 4.63 (95% confidence interval [CI] 3.80- 5.63), 4.22 (95% CI 3.66- 4.87), 3.52 (95% CI 3.03- 4.08), and 1.27 (95% CI 1.20- 1.35), respectively for the patients who suffered from OF only (n=88,561). The corresponding figures for the patients with GIB only (n=5,184) were lower but still significant at 1.44 (95% CI 1.09-1.91), 1.42 (95% CI 1.15-1.75), 1.54 (95% CI 1.19-2.00), and 1.38 (95% CI 1.28-1.48). The co-existence of GIB in patients with OF (n=1,663) showed little additional risk of all adverse outcomes.

Conclusions: Patients with GIB and no OF can be classified as moderate AP.

(The study was performed in Chi Mei Medical Center and supported by grant CMFHR10025 from the hospital.)