

Pancreatic Laceration and Bicycle

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Dear Editor,

Isolated pancreatic injuries are very rare, usually occurring in children after falling from a bicycle and the handlebars hitting the abdomen. In pancreatic injuries, examination and laboratory findings are usually normal in the acute phase. Symptoms may be seen late and may have fatal results. In the acute phase, the sensitivity of abdominal tomography (CT) is 85%, while it can be evaluated as normal when first taken. Minor injuries may show symptoms days later. Therefore, suspected patients should definitely be hospitalized and followed up. Complications include acute pancreatitis, pseudocyst formation, pancreatic enzyme leakage, and retroperitoneal abscess after autodigestion. We aimed to emphasize the importance of the subject with a case example.

A 10-year-old male patient was brought to the emergency room after falling off a bicycle. The patient's general condition was good and he was conscious. His blood pressure was 100/70 mmHg. Pulse: 104/min. Respiration: 16/min. Temperature: 36.7 C. Physical examination revealed tenderness in the epigastric region and ecchymosis of 2 cm in diameter. Laboratory results showed WBC: $8 \times 10^3/\mu\text{L}$, CRP: 26, Amylase: 497 U/L, Lipase: 958 U/L. Abdominal CT revealed locally high-density (hemorrhagic content) free fluid in the Morrison pouch and pelvic region, reaching a diameter of approximately 4 cm. A heterogeneous hypodense volumetric appearance was seen at the distal part of

the pancreatic body and tail, and at this level, a hyperdense area of approximately 21x22 mm (mean 63 HU) with borders that could not be clearly distinguished from the pancreatic tissue, which was initially evaluated as a hematoma. An appearance compatible with pancreatic laceration was detected. The patient was admitted to the pediatric surgery ward with the diagnosis of pancreatic laceration. Pancreatic injury should be considered in the differential diagnosis in abdominal traumas. It should not be forgotten that physical examination, amylase and lipase values may not be sufficient to diagnose the severity of acute trauma and that abdominal tomography should be evaluated in necessary cases.

Key words: pancreatic laceration; bicycle; abdominal tomography

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