

# SCIENTIFIC PROGRAM

## 51<sup>st</sup> Meeting of the **European Pancreatic Club**

**June 26-29<sup>th</sup>, 2019**

**Bergen, Norway**



## WELCOME NOTE

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On behalf of the EPC Council and the organizing committee it is a pleasure to welcome you to the 51<sup>st</sup> Annual Meeting of the European Pancreatic Club.

The EPC meeting has been arranged in Norway only once before (Oslo, 1976). This time we invite you to Bergen, the gateway to the Norwegian fjords and our second largest city. With 460 submitted abstracts and 650 delegates, the current meeting will be one of the largest EPC events ever. The organizing committee has put together an exciting program that consists of keynote lectures, thematic symposia, oral abstract presentations, flash talks and poster sessions, covering many different aspects of pancreatic biology and disease. In addition, we are proud of our pre-meeting program, which offers you the following *smorgasbord* to select from:

- a UEG-supported Live Educational Event on pancreatic imaging
- a YOUPIIE/HPSG workshop on clinical research
- a basic science workshop on “Tools of the trade in pancreatic biology”
- a symposium on new developments in exocrine-endocrine pancreatic interactions

We would like to express our gratitude to around 100 faculty members for giving invited lectures or chairing sessions, and to the oral abstract and poster presenters for sharing their latest results. Moreover, we thank our scientific advisory committee and the abstract selection committee for helping with putting the program together.

Without the generous support from our sponsors, both non-commercial stakeholders and the industry, an EPC meeting of such scale would not have been possible. Therefore, to our sponsors, exhibitors and other benefactors: *Thank you so much!*

Last but not least, we encourage young clinicians and researchers to take advantage of this special opportunity to learn as much pancreatology as possible. Interact actively with your fellows, approach your senior colleagues, establish international collaborations and enjoy Bergen!



Anders Molven  
EPC President 2019



Caroline S. Verbeke  
Vice chair of EPC meeting 2019



J.-Matthias Löhr  
EPC Secretary General



## COMMITTEES

### Congress Chair / EPC President 2019

Anders Molven, PhD  
Gade Laboratory for Pathology, Dept. of Clinical Medicine  
University of Bergen and Haukeland University Hospital  
N-5021 Bergen, Norway

### Congress Vice Chair

Caroline S. Verbeke, MD, PhD  
Dept. of Pathology, Institute of Clinical Medicine  
University of Oslo and Oslo University Hospital  
N-0424 Oslo, Norway

### EPC Council 2019

Past President: Markus M. Lerch, Greifswald  
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Ilse Rooman, Brussels  
Rainer L. Heuchel, Stockholm

#### Clinical science

Ali A. Aghdassi, Greifswald  
Andrea Párniczky, Pécs  
Michael Feretis, Cambridge  
Robert Moran, Charleston

### EPC 2019 Local Organizing Committee

Chair: Anders Molven, Bergen  
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Bente B. Johansson, Bergen  
Dag Hoem, Bergen  
Erling Tjora, Bergen  
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Ingfrid S. Haldorsen, Bergen  
Karianne Fjeld, Bergen  
Roald F. Havre, Bergen  
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Marco Del Chiaro, Stockholm/Denver  
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UEG wishes you a successful  
51<sup>st</sup> Meeting of the  
European Pancreatic Club!

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Venue: Fira Gran Via, Barcelona

# 2019

Register now and  
benefit from our  
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## GENERAL INFORMATION

### Meeting venue

Grieghallen, Edvard Griegs Plass 1,  
N-5015 Bergen, Norway  
Phone: +47 55216100 | www.grieghallen.no

All sessions take part in the conference hall “Peer Gynt” if not otherwise stated in the program.

### Registration and conference secretariat opening hours:

Wednesday June 26 ..... 08:00–18:00  
Thursday June 27 ..... 08:00–18:00  
Friday June 28 ..... 08:00–18:00  
Saturday June 29 ..... 08:30–13:00

### Name badge

Your name badge gives you admission to the scientific sessions, lunch and coffee breaks. Your badge must be worn at all times at the conference venue.

### Coffee breaks

Coffee is served in the exhibition area.

### Lunch

A buffet lunch is served Thursday – Saturday in the exhibition area. For participants attending the lunch symposia, a lunch bag will be available in the auditoriums. For delegates attending the workshops on Wednesday, lunch is served in the lobby outside Peer Gynt.

### Internet access

There is free WI-FI at the congress venue. Log-on information is:  
Network name: grieg\_guestnet  
Password: nystemten

### Speaker’s room

Please deliver your presentations in room Bøygen (behind the scene of Peer Gynt-salen) no later than 90 minutes before your session starts. For morning speakers, please deliver the presentation in the afternoon before.

### Local transportation

Bergen is an easy city to get around in. Shopping centers, restaurants, attractions and hotels are located near the inner city core and harbor, all within walking distance from the congress venue.

### Sightseeing

Please visit Bergen’s official travel guide: [www.visitbergen.com](http://www.visitbergen.com) for more information on the varied tourist attractions and local sights of Bergen.

### Home page

[epc2019.no](http://epc2019.no) – our website will be continuously updated prior to the congress.

## SOCIAL PROGRAM

### RECEPTION BY THE MUNICIPALITY OF BERGEN

This event will take place Wednesday June 26<sup>th</sup> at 19.00 in Håkonshallen. This is a ticketed event. The reception is fully booked.

*Dress code: Informal*

At the reception you will be able to enjoy a light meal and beverages in the company of friends and colleagues. Håkonshallen is located at the harbor and only a 15 minutes walk from the conference venue. Please see map below.

### CONGRESS DINNER

The dinner will take place Friday June 28<sup>th</sup> at 19.30 in the Fløien Folkerestaurant, at Mount Fløyen.

*Dress code: Smart casual*

If you have registered for the Congress Dinner, you will receive a ticket (both for dinner and funicular) along with your name badge upon registration. Do not forget to bring your ticket for the Fløibanen funicular! This ticket will also be needed for return to the city after the Congress Dinner.

The Congress Dinner is fully booked.

Departure from Fløibanen (city station) no later than 19:00.





## THE EPC PRESIDENT'S TIPS FOR YOUR STAY IN BERGEN

### **Bergen is surrounded by seven mountains**

Inspired by the seven hills of Rome, Bergen is called “The City Between the Seven Mountains”. But the locals are arguing about which seven they are! The set used for our annual 7-Mountain Hike is Lyderhorn, Damsgårdsfjellet, Løvstakken, Ulriken, Fløyen, Rundemanen and Sandviksfjellet. In particular, Ulriken, Fløyen and Løvstakken are mountains that are easily accessible from the city centre. If you wish to hike them, remember good shoes, rain clothes and that the weather may suddenly change.

### **Bergen is an Eldorado for running**

If you want to go for a run, there are many possibilities. We suggest the road Fjellveien located on the hillside of Mount Fløyen. If you run or walk in the northward direction you will eventually come to Stoltzekleiven. The track up to the summit consists of 800 steps and has a climb of 301 meters. See if you can beat the world record: it is an amazing 7 minutes and 54 seconds!

### **Bergen is famous for its wooden houses**

Explore the areas where people live in Nordnes, Fjellsiden and Sandviken. Enjoy the wooden houses separated by narrow alleys (“smau”) paved with cobblestones. Feel free to walk wherever you want, except into backyards and private gardens. Suggested streets to visit are Strangehagen, Knøsesmauet, Verftsbakken, Vetrilidsallmenningen, Bispengsgaten, Skansen and Rosesmauet. In the museum Gamle Bergen («Old Bergen»), there is a very nice collection of old city houses with possibilities to visit their historic interiors.

### **Bergen is where the leprosy bacillus was discovered**

Between 1850 and 1900 Bergen had three hospitals for leprosy patients and the largest concentration of patients in Europe. The two last hospitalized patients died in 1946. The city's oldest leprosy hospital, St. Jørgen's Hospital, is now a small museum, also serving as a monument to thousands of personal tragedies. In many parts of the world, leprosy is known as Hansen's disease after the Norwegian physician Armauer Hansen, who was the first to identify *Mycobacterium leprae*. This happened in Bergen in 1873. The leprosy museum is located less than five minutes from the railway station.

### **Bergen is a musical capital of Norway**

Norway's most famous composer, Edvard Grieg, was born and lived in Bergen. He served as the artistic director of Bergen Philharmonic Orchestra, which is one of the world's oldest orchestras, dating back to 1765. A visit to Edvard Grieg's home, Troldhaugen, located 8 km south of the city, is highly recommended.

Another treat is an excursion to Lysøen, a small island located 25 km south of Bergen. This was the home of Ole Bull, at his time a world-renown virtuoso violinist and composer. His impassioned dedication to Norway's folk music played a key role in our cultural development following the separation from Denmark in 1814. As musician, networker and inspirator, Bull was in fact our first superstar.



## GRIEGHALLEN FLOOR PLAN

### STANDS:

- 1-3: Mylan
- 4-5: Akcea
- 6: Immunovia
- 7: Nutricia
- 8: Servier

POSTER  
 AREA 1

PEER GYNT-SALEN  
 PLENARY ROOM

TROLDTOG,  
 2<sup>ND</sup> FLOOR

POSTER  
 AREA 3

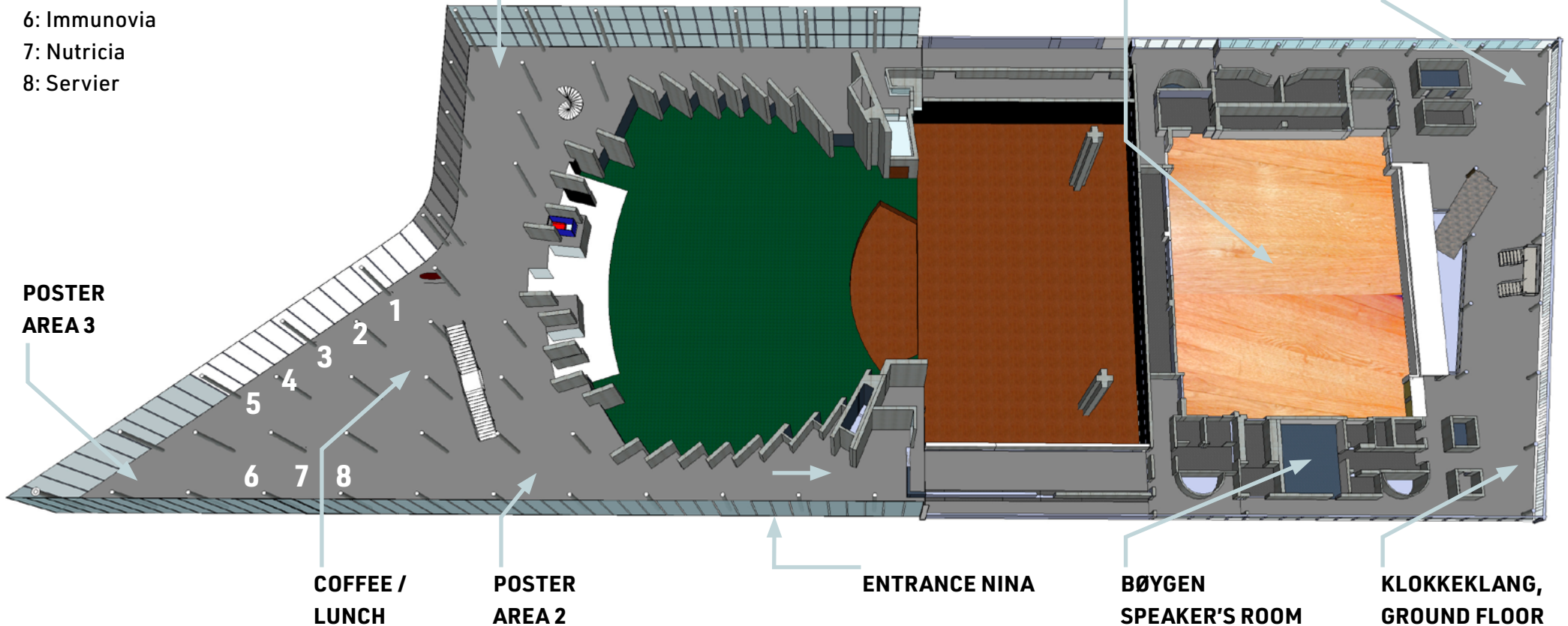
POSTER  
 AREA 2

ENTRANCE NINA

BØYGEN  
 SPEAKER'S ROOM

KLOKKEKLANG,  
 GROUND FLOOR

COFFEE /  
 LUNCH





## NON-COMMERCIAL SPONSORS

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NORWEGIAN **CANCER** SOCIETY

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**The Research Council**  
of Norway

## NOTES

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## PROGRAM OVERVIEW – PRE-MEETING EVENTS

### Wednesday June 26<sup>th</sup> 2019

Time	Event
09.30-13.30	YOUPIIE/HPSG CLINICAL WORKSHOP
10.00-13.35	BASIC SCIENCE WORKSHOP - Tools of the trade in pancreatic biology
13.35-14.00	BREAK
14.00-16.10	UEG LIVE EDUCATIONAL EVENT (Part 5) - Future opportunities of pancreatic imaging
16.10-16.40	COFFEE BREAK / INDUSTRY EXHIBITION
16.40-18.00	SYMPOSIUM - Exocrine-endocrine interactions in pancreatic disease
19.00-20.30	RECEPTION HOSTED BY THE MUNICIPALITY OF BERGEN (Ticketed event)

## PROGRAM OVERVIEW

### Thursday June 27<sup>th</sup> 2019

Time	Event
08.25-08.30	WELCOME ADDRESS
08.30-09.00	DIABETES AND EXOCRINE-ENDOCRINE INTERACTIONS (Oral abstract presentations 1-3)
09.00-10.00	FLASH TALKS - Poster presentations 1-19
10.00-10.30	COFFEE BREAK / INDUSTRY EXHIBITION
10.30-11.30	<b>SYMPOSIUM 1 - The potential of liquid biopsies in pancreatic disease</b>
11.30-12.00	THE AASE MEMORIAL LECTURE - Pancreatic cancer
12.00-14.00	LUNCH / POSTER SESSIONS / INDUSTRY EXHIBITION / INDUSTRY SYMPOSIUM
14.00-15.20	<b>SYMPOSIUM 2 - Challenges of pancreatitis</b>
15.30-16.40	ACUTE PANCREATITIS (Oral abstract presentations 6-12)
16.40-17.00	COFFEE BREAK / INDUSTRY EXHIBITION
17.00-18.30	<b>SYMPOSIUM 3 - Treatment of advanced pancreatic cancer and new surgical methods</b>
19.30-22.30	FACULTY DINNER (By invitation only)



## PROGRAM OVERVIEW

### Friday June 28<sup>th</sup> 2019



Time	Event
08.30-09.00	CYSTIC LESIONS (Oral abstract presentations 13-15)
09.00-10.00	<b>SYMPOSIUM 4 - Pathology of pancreatic cancer</b>
10.00-10.30	COFFEE BREAK / INDUSTRY EXHIBITION
10.30-10.55	PANCREATIC CANCER EUROPE LECTURE - Gut microbiome
10.55-11.30	YOUPPIE AWARD 2019 / BEST SUBMITTED ABSTRACTS
11.30-11.55	EPC LIFETIME AWARD LECTURE
11.55-13.30	LUNCH / POSTER SESSIONS / INDUSTRY EXHIBITION / INDUSTRY SYMPOSIUM
13.30-15.00	<b>EPC GENERAL ASSEMBLY</b>
15.10-15.40	PANCREATIC CANCER - EXPERIMENTAL (Oral abstract presentations 18-20)
15.40-16.30	CHRONIC AND AUTOIMMUNE PANCREATITIS (Oral abstract presentations 21-25)
16.30-17.00	COFFEE BREAK / INDUSTRY EXHIBITION
17.00-18.30	<b>SYMPOSIUM 5 - Clinical databases in pancreatology</b>
19.30-00.30	CONGRESS DINNER (Ticketed event)

## PROGRAM OVERVIEW

### Saturday June 29<sup>th</sup> 2019

Time	Event
09.00-09.25	<b>KEYNOTE LECTURE - Pancreatic cancer</b>
09.25-10.05	PANCREATIC CANCER - EXPERIMENTAL AND CLINICAL (Oral abstract presentations 26-29)
10.05-10.35	IMAGING AND ENDOSCOPY (Oral abstract presentations 30-32)
10.35-11.00	COFFEE BREAK / INDUSTRY EXHIBITION
11.00-12.15	<b>SYMPOSIUM 6 - Genetics and genomics</b>
12.15-12.45	MOLECULAR AND CELL BIOLOGY (Oral abstract presentations 33-35)
12.45-13.00	END OF MEETING - FAREWELL - LUNCH / LUNCH BAGS

**DETAILED PROGRAM**Wednesday June 26<sup>th</sup> 2019

09.30-13.30	<b>YOUPPIE/HPSG CLINICAL WORKSHOP</b> Conference room: Peer Gynt	 
09.30-09.40	<b>Introduction</b> Enrique de-Madaria, Alicante, Spain; Péter Hegyi, Pécs, Hungary	
09.40-10.00	<b>YOUPPIE perspectives</b> Hanna Sternby, Lund, Sweden	
10.00-10.20	<b>HPSG perspectives</b> Péter Hegyi, Pécs, Hungary	
10.20-10.40	<b>How to perform a meta-analysis</b> Zsolt Szakács, Pécs, Hungary	
10.40-11.00	<b>How to build up a registry</b> Bálint Erőss, Pécs, Hungary	
11.00-11.20	<b>How to organize a clinical trial</b> Noémi Zádori, Pécs, Hungary	
11.20-11.45	<b>Interdisciplinary help by TM-CENTRE</b> Andrea Szentesi, Pécs, Hungary	
11.45-12.05	<b>LUNCH BREAK</b>	
12.05-12.15	<b>Currently running HPSG registries</b> Andrea Párniczky, Pécs, Hungary	
12.15-12.25	<b>Currently running HPSG trials</b> Alexandra Mikó, Pécs, Hungary	

**DETAILED PROGRAM**Wednesday June 26<sup>th</sup> 2019 cont.

12.25-12.35	<b>PrescrAIP: A Pan-European Study on Current Treatment Regimens of Auto-Immune Pancreatitis</b> Jonas Rosendahl, Halle, Germany (Pancreas 2000)
12.35-12.45	<b>Endoscopic vs. Surgical Ampullectomy vs. Pancreaticoduodenectomy (ESAP) for ampullary neoplasm</b> Marcus Hollenbach, Leipzig, Germany (Pancreas 2000)
12.45-12.55	<b>Waterfall trial: aggressive versus moderate fluid resuscitation in acute pancreatitis</b> Enrique de-Madaria, Alicante, Spain
12.55-13.05	<b>Galadriel trial: Lactated Ringer´s solution vs normal solution in acute pancreatitis</b> Enrique de-Madaria, Alicante, Spain
13.05-13.15	<b>Lifestyle, Prevention and Risk of Acute Pancreatitis (LIFESPAN)</b> Erika Darvasi, Szeged, Hungary
13.15-13.25	<b>EarLy Elimination of Fatty Acids iN hypertriglyceridemia-induced acute pancreatitis (ELEFANT trial)</b> Erika Darvasi, Szeged, Hungary
13.25-13.30	<b>Closing remarks</b> Enrique de-Madaria, Alicante, Spain; Péter Hegyi, Pécs, Hungary



**DETAILED PROGRAM**Wednesday June 26<sup>th</sup> 2019 cont.**10.00-13.35 BASIC SCIENCE WORKSHOP - Tools of the trade in pancreatic biology**

Conference room: Trolldtog

**10.00-11.00 Session I – CELL BIOLOGY**

Chairs: Anders Molven, Bergen, Norway; Bente B. Johansson, Bergen, Norway

**10.00-10.20 Autophagy in pancreatic disorders**

Maria I. Vaccaro, Buenos Aires, Argentina

**10.20-10.40 Pancreatic stellate cells - what's new?**

Minoti Apte, Sydney, Australia

**10.40-11.00 Stem cells and their application in pancreatic cancer research**

Alexander Kleger, Ulm, Germany

**11.00-11.15 COFFEE BREAK****11.15-12.15 Session II – PANCREATIC CANCER**

Chairs: Minoti Apte, Sydney, Australia; Corinne Bousquet, Toulouse, France

**11.15-11.25 Modelling pancreatic cancer in zebrafish embryos**

Gregorio Di Franco, Pisa, Italy

**11.25-11.35 Modelling pancreatic cancer in avian embryos**

Arthur Chevallier, Lyon, France

**11.35-11.55 Organoids in pancreatic cancer research**

Daniel Öhlund, Umeå, Sweden

**11.55-12.15 Molecular epidemiology in pancreatic cancer - why and how**

Núria Malats, Madrid, Spain

**DETAILED PROGRAM**Wednesday June 26<sup>th</sup> 2019 cont.**12.15-12.35 LUNCH BREAK****12.35-13.35 Session III – PANCREATITIS**

Chairs: Maria Vaccaro, Buenos Aires, Argentina; Andrea Párniczky, Pécs, Hungary

**12.35 – 12.55 Mouse models for pancreatitis**

Rainer L. Heuchel, Stockholm, Sweden

**12.55 – 13.15 Modeling human pancreatitis in genetically altered mice**

Miklos Sahin-Toth, Los Angeles, USA

**13.15 – 13.35 Genome-wide association studies in pancreatitis**

Jonas Rosendahl, Halle, Germany

**13.35-14.00 BREAK**

## DETAILED PROGRAM

Wednesday June 26<sup>th</sup> 2019 cont.

- 14.00–16.10 UEG LIVE EDUCATIONAL EVENT (Part 5) - Future opportunities of pancreatic imaging**  
 Chairs: Odd Helge Gilja, Bergen, Norway; Ingrid S. Haldorsen, Bergen, Norway; Jens B. Frøkjær, Aalborg, Denmark
- 
- 14.00–14.25 Imaging pancreatic cancer morphogenesis**  
 Axel Behrens, London, UK
- 14.25–14.45 Radiomics - the new frontier in pancreatic imaging**  
 John J. Hermans, Nijmegen, Netherlands
- 14.45–15.00 Improvements in radiology staging of locally advanced pancreatic cancer**  
 Raffaella M. Pozzi Mucelli, Stockholm, Sweden
- 15.00–15.15 COFFEE BREAK**
- 15.15–15.35 Ultrasound and microbubbles – a new treatment modality in pancreatic cancer?**  
 Spiros Kotopoulos, Bergen, Norway
- 15.35–15.50 New advances in PET/CT imaging of insulinoma and congenital hyperinsulinism: Results from the BetaCure project**  
 Marti Boss, Nijmegen, Netherlands
- 15.50–16.10 Exendin as a theranostic platform: The future of diagnosing and treating beta-cell pathologies?**  
 Martin Gotthardt, Nijmegen, Netherlands
- 
- 16.10–16.40 COFFEE BREAK / INDUSTRY EXHIBITION**

## DETAILED PROGRAM

Wednesday June 26<sup>th</sup> 2019 cont.

- 16.40–18.00 SYMPOSIUM - Exocrine-endocrine interactions in pancreatic disease**  
 Chairs: Pål R. Njølstad, Bergen, Norway; Miklos Sahin-Toth, Los Angeles, USA
- 
- 16.40 – 17.00 Type 1 diabetes originates from low-grade pancreatitis**  
 Olle Korsgren, Uppsala, Sweden
- 17.00 – 17.20 Crosstalk between pancreatic exocrine and endocrine cells in diabetes**  
 Rohit N. Kulkarni, Boston, USA
- 17.20 – 17.40 How O-glycosylation may influence exocrine and endocrine pancreatic function**  
 Gerrit Wolters-Eisfeld, Hamburg, Germany
- 17.40 – 18.00 Pancreatic enzymes in glucose homeostasis**  
 Arya Mani, New Haven, USA
- 
- 19.00–20.30 RECEPTION HOSTED BY THE MUNICIPALITY OF BERGEN (Ticketed event)**



## NOTES

## DETAILED PROGRAM

Thursday June 27<sup>th</sup> 2019

- 08.25-08.30 **Welcome address**  
Anders Molven, Bergen, Norway
- 
- 08.30-09.00 **DIABETES AND EXOCRINE-ENDOCRINE INTERACTIONS  
(Oral abstract presentations)**  
Chairs: László Czakó, Szeged, Hungary; Dmitry Bordin, Moscow, Russia
- 08.30-08.40 **ORAL-1: The function of CFTR Cl<sup>-</sup> channel in the exocrine/endocrine pancreas under pathological conditions**  
Attila Ébert, Szeged, Hungary
- 08.40-08.50 **ORAL-2: Blood levels of adiponectin and IL-1Ra could facilitate earlier detection of PDAC by distinguishing individuals with type 3c diabetes from those with type 2**  
Lucy Oldfield, Liverpool, UK
- 08.50-09.00 **ORAL-3: Prognostic value of reliably assessed diabetes mellitus type 2 in pancreatic cancer**  
Esther Molina Montes, Madrid, Spain

- 
- 09.00-10.00 **FLASH TALKS - Poster presentations**  
Chairs: Karianne Fjeld, Bergen, Norway; Jonas Rosendahl, Halle, Germany
- FT-1 (Poster no. P4-22):  
**Exploring a new role for cytidine deaminase in pancreatic cancer metabolism**  
Audrey Frances, Toulouse, France
- FT-2 (Poster no. P4-23):  
**Tumor-stroma metabolic symbiosis via the IL-17B/RB axis affects metastatic potential of pancreatic ductal adenocarcinoma**  
Jiahui Li, Cologne, Germany
- FT-3 (Poster no. P7-32):  
**Neurons chemoattract cancer cells via MCP-1-CCR4-induced paxillin phosphorylation and activation in the cancer cell cytoskeleton**  
Xiaobo Wang, Munich, Germany

## DETAILED PROGRAM

Thursday June 27<sup>th</sup> 2019 cont.

FT-4 (Poster no. P7-31):

**Biological role of perineural invasion in pancreatic ductal cancer**

Giulia Gasparini, Milan, Italy

FT-5 (Poster no. P7-33):

**The cellular proteome of pancreatic ductal adenocarcinoma**

Laxmi Silwal-Pandit, Oslo, Norway

FT-6 (Poster no. P7-50):

**Development of PDAC organoids on decellularized extracellular matrices**

Ezekiel Rozmus, Bergen, Norway

FT-7 (Poster no. P7-48):

**Targeting tumor intrinsic metabolic node in pancreatic cancer causes tumor regression, remodels extracellular matrix and sensitizes to anti -PD1 therapy**

Nikita Sharma, Miami, United States

FT-8 (Poster no. P7-34):

**Of mice and men: parallel analysis of pancreatic cancer tumours and patient-derived mouse models by next-generation sequencing**

Andrea Mafficini, Verona, Italy

FT-9 (Poster no. P5-43):

**Multicenter, retrospective study to assess the efficiency of different preoperative chemotherapy regimes for borderline resectable and locally advanced pancreatic cancer - Results of the RESPECT-Study**

Stephan Schorn, Munich, Germany

FT-10 (Poster no. P3-28):

**Disturbances in bioelements homeostasis as possible mechanism of cadmium pancreatic carcinogenicity**

Aleksandra Buha, Belgrade, Serbia

FT-11 (Poster no. P5-10):

**A multifactorial score for pancreatic ductal adenocarcinoma risk prediction**

Manuel Gentiluomo, Pisa, Italy

## DETAILED PROGRAM

Thursday June 27<sup>th</sup> 2019 cont.

FT-12 (Poster no. P7-65)

**ERCP is more challenging in cases of acute biliary pancreatitis than in acute cholangitis – an analysis of the Hungarian ERCP Registry data**

Dániel Pécsi, Pécs, Hungary

FT-13 (Poster no. P2-09)

**Computed tomography and transabdominal ultrasound should be considered equal options as parts of the primary diagnostic workup for chronic pancreatitis**

Ingrid Kvåle Nordaas, Bergen, Norway

FT-14 (Poster no. P2-07)

**Muscle parameters measured by CECT during acute pancreatitis correlate with severity unlike parameters of un-involved fat depots**

Hanna Sternby, Lund, Sweden

FT-15 (Poster no. P6-17)

**Impact on survival and recurrence of positive histological resection after pancreatoduodenectomy in patients with lymph node invasion: an international multicentric study**

Gaëtan-Romain Joliat, Lausanne, Switzerland

FT-16 (Poster no. P1-18)

**The novel c.1120A>G (p.K374E) variant of the CPA1 gene cause misfolding-induced hereditary pancreatitis**

Balázs Németh, Szeged, Hungary

FT-17 (Poster no. P1-06)

**The antitumoral Trifluoperazine (TFP) derived compound ZZW-115 induces programmed cell death by both apoptosis and necroptosis**

Wenjun Lan, Marseille, France

FT-18 (Poster no. P1-10)

**mTORC1 and mTORC2 converge on the Arp 2/3 complex-mediated actin cytoskeleton regulation in promoting ADM formation**

Yamin Zhao, Munich, Germany

FT-19 (Poster no. P1-24)

**The role of chymotrypsin-like protease in pancreatitis in mice**

Dóra Mosztabacher, Boston, United States



## DETAILED PROGRAM

Thursday June 27<sup>th</sup> 2019 cont.

10.00-10.30	COFFEE BREAK / INDUSTRY EXHIBITION
10.30-11.30	<b>SYMPOSIUM 1 - The potential of liquid biopsies in pancreatic disease</b>
Chairs:	J.-Matthias Löhr, Stockholm, Sweden; Eithne Costello, Liverpool, UK
10.30-10.55	<b>Liquid biopsy: A new diagnostic concept in oncology</b> Katharina Effenberger, Hamburg, Germany
10.55-11.10	<b>Monitoring of circulating tumor DNA in pancreatic cancer</b> Oddmund Nordgård, Stavanger, Norway
11.10-11.20	<b>ORAL-4: Tumor-derived exosomes inhibit natural killer (NK) cell functions in the pre-metastatic niche of pancreatic cancer</b> Jiangang Zhao, Cologne, Germany
11.20-11.30	<b>ORAL-5: Different exosome populations generated during acute pancreatitis</b> Daniel Closa, Barcelona, Spain
11.30-12.00	<b>KEYNOTE LECTURE</b>
Speaker:	Diane Simeone, New York, USA <b>A new paradigm for clinical trials in pancreatic cancer: Precision Promise</b> The Dentist Olaf Aase and Wife Memorial Lecture. Supported by the Norwegian Cancer Society
Chair:	Ilse Rooman, Brussels, Belgium
12.00-14.00	LUNCH / POSTER SESSIONS 1-4 / INDUSTRY EXHIBITION / INDUSTRY SYMPOSIUM

## DETAILED PROGRAM

Thursday June 27<sup>th</sup> 2019 cont.

14.00-15.20	<b>SYMPOSIUM 2 - Challenges of pancreatitis</b>
Chairs:	Vinciane Rebours, Clichy, France; Davor Štimac, Rijeka, Croatia
14.00-14.20	<b>The role of immune cells in pancreatitis</b> Aida Habtezion, Stanford, USA
14.20-14.40	<b>The role of lysosomes and lysosomal enzymes in pancreatitis</b> Markus M. Lerch, Greifswald, Germany
14.40-15.00	<b>Can surgery alone regulate pain in chronic pancreatitis?</b> Güralp O. Ceyhan, Istanbul, Turkey
15.00-15.20	<b>Predicting and improving the outcomes of pediatric pancreatitis</b> Maisam Abu-El-Hajja, Cincinnati, USA
15.20-15.30	SHORT BREAK
15.30-16.40	<b>ACUTE PANCREATITIS (Oral abstract presentations)</b>
Chairs:	Ashok Saluja, Miami, USA; Ali A. Aghdassi, Greifswald, Germany; Grzegorz Oracz, Warsaw, Poland
15.30-15.40	<b>ORAL-6: Macrophage-derived cytokines of the IL1 family simultaneously regulate pro- and anti-inflammation during severe acute pancreatitis</b> Matthias Sendler, Greifswald, Germany
15.40-15.50	<b>ORAL-7: 9-(N-methyl-L-isoleucine)-cyclosporin A (NIM811) reduces the severity of acute pancreatitis via inhibition of the mitochondrial transition pore</b> Emese Tóth, Szeged, Hungary
15.50-16.00	<b>ORAL-8: Long-term evolution of asymptomatic walled-off pancreatic necrosis after hospital discharge</b> Sorin Traian Barbu, Cluj-Napoca, Romania
16.00-16.10	<b>ORAL-9: Development of a model to determine the risk of recurrence of acute biliary pancreatitis before cholecystectomy - A multicentre, retrospective cohort study</b> Daniel De la Iglesia-Garcia, Santiago de Compostela, Spain

## DETAILED PROGRAM

Thursday June 27<sup>th</sup> 2019 cont.

- 16.10-16.20** **ORAL-10: Prognostic efficacy of gastrointestinal injury score at early phase of acute necrotizing pancreatitis**  
Oleksandr Rotar, Chernivtsi, Ukraine
- 16.20-16.30** **ORAL-11: Development and validation of a patient-reported outcome measurement in acute pancreatitis: the PAN-PROMISE study**  
Enrique de-Madaria, Alicante, Spain
- 16.30-16.40** **ORAL-12: Can PASS activity index be utilized around the world? Results from a multi-center, international, prospective cohort in acute pancreatitis**  
Anna Phillips, Pittsburgh, USA
- 
- 16.40-17.00** **COFFEE BREAK / INDUSTRY EXHIBITION**
- 
- 17.00-18.30** **SYMPOSIUM 3 - Treatment of advanced pancreatic cancer and new surgical methods**  
Chairs: Johanna Laukkarinen, Tampere, Finland; Stefano Crippa, Milan, Italy; Knut Jørgen Labori, Oslo, Norway
- 17.00-17.18** **Adjuvant and neo-adjuvant treatment for locally advanced pancreatic cancer: What should we do?**  
Thierry Conroy, Nancy, France
- 17.18-17.36** **Surgery is an effective option for locally advanced pancreatic cancer**  
Marco Del Chiaro, Denver, USA
- 17.36-17.54** **Is surgery for metastatic pancreatic cancer possible?**  
Sohei Satoi, Hirakata, Japan
- 17.54-18.10** **Discussion**
- 18.10-18.30** **How can robotic surgery be applied in the treatment of pancreatic cancer?**  
Thilo Hackert, Heidelberg, Germany
- 19.30-22.30** **FACULTY DINNER (By invitation only)**

## DETAILED PROGRAM

Friday June 28<sup>th</sup> 2019

- 08.30-09.00** **CYSTIC LESIONS  
(Oral abstract presentations)**  
Chairs: J. Enrique Domínguez-Muñoz, Santiago de Compostela, Spain; Roald F. Havre, Bergen, Norway
- 08.30-08.40** **ORAL-13: Age, obesity, diabetes and initial cyst size are associated with the risk of progression of BD-IPMN undergoing follow-up**  
Gabriele, Capurso, Milan, Italy
- 08.40-08.50** **ORAL-14: A tug-of-war in IPMN management: a comparison between 2017 International and 2018 European guidelines**  
Stefano Crippa, Milan, Italy
- 08.50-09.00** **ORAL-15: Development of a nomogram based on radiologic findings for predicting malignancy and invasiveness in intraductal papillary mucinous neoplasms of the pancreas: an international, multicenter study**  
Hyeong Seok Kim, Seoul, South Korea
- 
- 09.00-10.00** **SYMPOSIUM 4 - Pathology of pancreatic cancer**  
Chairs: Jérôme Cros, Paris, France; Thomas Gress, Marburg, Germany
- 09.00-09.20** **Heterogeneity in pancreatic ductal adenocarcinoma**  
Irene Esposito, Düsseldorf, Germany
- 09.20-09.40** **Evaluating the effect of neoadjuvant treatment**  
Caroline Verbeke, Oslo, Norway
- 09.40-10.00** **The tumor microenvironment of pancreatic cancer: Possible to predict the effect of treatment?**  
Eva Diamantis-Karamitopoulou, Bern, Switzerland
- 
- 10.00-10.30** **COFFEE BREAK / INDUSTRY EXHIBITION**



## DETAILED PROGRAM

Friday June 28<sup>th</sup> 2019 cont.**10.30-10.55 KEYNOTE LECTURE****Speaker:** Peer Bork, Heidelberg, Germany**The gut microbiome in pancreatic cancer**

Supported by Pancreatic Cancer Europe

**Chair:** Núria Malats, Madrid, Spain**10.55-11.55 AWARDS SESSION****Chairs:** Enrique de-Madaria, Alicante, Spain; Pramod Garg, New Dehli, India; Anders Molven, Bergen, Norway**10.55-11.10** YOUPIIE Award Lecture**Pancreatic cancer in the era of multiagent chemotherapy: Surgical perspectives and challenges**

Giuseppe Malleo, Verona, Italy

**11.10-11.20** Best clinical science abstract (ORAL-16)**Clinical outcome of endoscopic treatment of symptomatic sterile walled-off necrosis**

Lotte Boxhoorn, Amsterdam, Netherlands

**11.20-11.30** Best basic science abstract (ORAL-17)**Ring1b-mediated epigenetic silencing of acinar cell fate genes is a mandatory event in pancreatic carcinogenesis**

Ivonne Regel, Munich, Germany

**11.30-11.55** EPC LIFETIME AWARD LECTURE**The Pancreas: Riddles of a beautiful organ**

Rolf Graf, Zurich, Switzerland

**11.55-13.30 LUNCH / POSTER SESSIONS 5-7 / INDUSTRY EXHIBITION / INDUSTRY SYMPOSIUM**

## DETAILED PROGRAM

Friday June 28<sup>th</sup> 2019 cont.**13.30-15.00 EPC GENERAL ASSEMBLY****15.00-15.10 SHORT BREAK****15.10-15.40 PANCREATIC CANCER - EXPERIMENTAL (Oral abstract presentations)****Chairs:** Albrecht Neesse, Goettingen, Germany; Beatrice Mohelníková Duchoňová, Olomouc, Czech Republic**15.10-15.20 ORAL-18: In vitro characterization of different pancreatic stellate cell cultures commonly used for the study of human pancreatic cancer**

Manoj Amrutkar, Oslo, Norway

**15.20-15.30 ORAL-19: EZH2 controls PDAC plasticity by regulating differentiation genes**

Shilpa Patil, Goettingen, Germany

**15.30-15.40 ORAL-20: ZZW-115: a NUPR1 inhibitor for pancreatic adenocarcinoma treatment**

Patricia Santofimia-Castaño, Marseille, France

**15.40-16.30 CHRONIC AND AUTOIMMUNE PANCREATITIS (Oral abstract presentations)****Chairs:** Natalya Gubergits, Lyman, Ukraine; Gitta Maria Wanner-Seleznik, Zurich, Switzerland**15.40-15.50 ORAL-21: Investigation of the pathomechanism of smoke-induced pancreatic damage**

Petra Pallagi, Szeged, Hungary

**15.50-16.00 ORAL-22: Malnutrition screening in patients with pancreatic disorders**

Mila Kovacheva-Slavova, Sofia, Bulgaria

**16.00-16.10 ORAL-23: Benefit of supplementation with LYM-X-SORB™, an absorbable structured lipid, in improving fat absorption, essential fatty acids and growth status in children with CF and PI with varying degrees of fat malabsorption**

Virginia Stallings, Philadelphia, USA

## DETAILED PROGRAM

Friday June 28<sup>th</sup> 2019 cont.

- 16.10-16.20** **ORAL-24: Immunogenetic profile and IgG4 levels discriminate among autoimmune pancreatitis type 1 and 2: A multicentric prospective study in the Caucasian population**  
Elisabetta Goni, Munich, Germany
- 16.20-16.30** **ORAL-25: Immunoglobulin G subtypes-1 and 2 (IgG1 and IgG2) can differentiate between autoimmune pancreatitis with associated cholangiopathy and primary sclerosing cholangitis**  
Miroslav Vujasinovic, Stockholm, Sweden
- 
- 16.30-17.00** **COFFEE BREAK / INDUSTRY EXHIBITION**
- 
- 17.00-18.30** **SYMPOSIUM 5 - Clinical databases in pancreatology**  
Chairs: Camilla Nøjgaard, Copenhagen, Denmark; Alexey V. Okhlobystin, Moscow, Russia
- 17.00-17.14** **Hereditary pancreatitis and pancreatic cancer - EUROPAC**  
Andrea Sheel, Liverpool, UK
- 17.14-17.28** **Pediatric recurrent and chronic pancreatitis - INSPPIRE**  
Mark E. Lowe, St. Louis, USA
- 17.28-17.42** **Acute pancreatitis - Hungarian Pancreatic Study Group**  
Péter Hegyi, Pécs, Hungary
- 17.42-17.56** **Chronic Pancreatitis - Scandinavian-Baltic Pancreatic Club Database**  
Jakob Lykke Poulsen, Aalborg, Denmark
- 17.56-18.10** **Pancreas surveillance - PACYFIC and CAPS**  
Kasper Overbeek, Rotterdam, Netherlands
- 18.10-18.30** **Discussion leader**  
Asbjørn Mohr Drewes, Aalborg, Denmark
- 
- 19.30-00.30** **CONGRESS DINNER (Ticketed event)**

## DETAILED PROGRAM

Saturday June 29<sup>th</sup> 2019

- 09.00-09.25** **KEYNOTE LECTURE**  
Speaker: Rolf Brekken, Dallas, USA  
Targeting pathways that drive epithelial plasticity and immune suppression in pancreatic cancer  
Chair: James B. Lorens, Bergen, Norway
- 
- 09.25-10.05** **PANCREATIC CANCER - EXPERIMENTAL AND CLINICAL (Oral abstract presentations)**  
Chairs: Julia Mayerle, Munich, Germany; Dong Uk Kim, Busan, South Korea
- 09.25-09.35** **ORAL-26: Genome-wide identification and functional characterization of critical circRNAs in pancreatic ductal adenocarcinoma**  
Chi Hin Wong, Shatin, Hong Kong
- 09.35-09.45** **ORAL-27: A single-center experience with 312 venous resections with pancreatectomy: Only elevated Ca 19-9 indicates impaired survival**  
Elena Rangelova, Stockholm, Sweden
- 09.45-09.55** **ORAL-28: Adjuvant therapy is associated with improved overall survival only in the subgroup of patients with pancreatobiliary or mixed subtype ampullary cancer after pancreatoduodenectomy - A large multicenter cohort analysis of more than 200 patients**  
Louisa Bolm, Luebeck, Germany
- 09.55-10.05** **ORAL-29: Number of harvested lymph nodes and stage migration effect in pancreatoduodenectomy for pancreatic ductal adenocarcinoma: Reappraising the standards based on the Eighth Edition of the American Joint Committee on Cancer**  
Laura Maggino, Verona, Italy



## DETAILED PROGRAM

Saturday June 29<sup>th</sup> 2019 cont.

- 10.05-10.35 IMAGING AND ENDOSCOPY**  
(Oral abstract presentations)  
Chairs: Søren Olesen, Aalborg, Denmark; Vikesh Singh, Baltimore, USA
- 10.05-10.15 ORAL-30: Role of magnetic resonance DTI in PDAC evaluation**  
Agnieszka Surowiecka-Pastewka, Warsaw, Poland
- 10.15-10.25 ORAL-31: Imaging prediction of islet yield and function in children undergoing total pancreatectomy with islet autotransplantation**  
Jaimie Nathan, Cincinnati, USA
- 10.25-10.35 ORAL-32: Combination of intravenous hydration and indomethacin suppository is the most effective therapy for the prevention of post-ERCP pancreatitis – A network meta-analysis**  
Katalin Márta, Pécs, Hungary
- 
- 10.35-11.00 COFFEE BREAK / INDUSTRY EXHIBITION**
- 
- 11.00-12.15 SYMPOSIUM 6 - Genetics and genomics**  
Chairs: Agnieszka Rygiel, Warsaw, Poland; Heiko Witt, Munich, Germany
- 11.00-11.20 The genetic architecture of type 2 diabetes - islet biology only?**  
Anna Gloyn, Oxford, UK
- 11.20-11.40 Is pancreatogenic diabetes genetically different from type 2 diabetes?**  
David Whitcomb, Pittsburgh, USA
- 11.40-12.00 Genetics and epigenetics of pancreatic neuroendocrine neoplasms**  
Aldo Scarpa, Verona, Italy
- 12.00-12.15 CEL - An extraordinarily polymorphic gene of the pancreas**  
Karianne Fjeld, Bergen, Norway

## DETAILED PROGRAM

Saturday June 29<sup>th</sup> 2019 cont.

- 12.15-12.45 MOLECULAR AND CELL BIOLOGY**  
(Oral abstract presentations)  
Chairs: Frank Ulrich Weiss, Greifswald, Germany; Rainer Heuchel, Stockholm, Sweden
- 12.15-12.25 Dysregulation of the splicing machinery as a potential novel diagnostic and therapeutic target for pancreatic neuroendocrine tumors**  
Sergio Pedraza-Arévalo, Cordoba, Spain
- 12.25-12.35 Endocytic vacuoles in pancreatic acinar cells: actination, dynamics, rupture and exocytosis**  
Svetlana Voronina, Liverpool, UK
- 12.35-12.45 PMCA pump dysfunction promotes Ca<sup>2+</sup> overload and pancreatic ductal epithelial cell damage in cystic fibrosis**  
Tamara Madácsy, Szeged, Hungary
- 
- 12.45-13.00 END OF MEETING - FAREWELL - LUNCH / LUNCH BAGS**

## POSTER SESSION OVERVIEW

### Poster Session 1 (Thursday June 27<sup>th</sup>, 12:00-12:30)

#### Cell and molecular biology / physiology / genetics I

- P1-01 Pancreatic ductal fluid and bicarbonate secretion of the newborn ferret and pig models of cystic fibrosis (CF)
- P1-02 Pancreatic ductal organoid cultures are suitable model to study pancreatic ductal ion secretion
- P1-03 Single-base deletions in the last exon of the carboxyl ester lipase gene (CEL): Effects on protein misfolding and ER-stress
- P1-04 Urocortin 2 mediates its protective effects in a rat model of caerulein-induced acute pancreatitis via Ca<sup>2+</sup> signaling and NF-κB modulation
- P1-05 Vitamin D prevents pancreatic cancer-induced apoptosis signaling of inflammatory cells
- P1-06 The antitumoral Trifluoperazine (TFP) derived compound ZZW-115 induces programmed cell death by both apoptosis and necroptosis
- P1-07 Identification of novel and rare recurrent genetic variants in early onset chronic pancreatitis by whole exome sequencing
- P1-08 Increase of CTRB2 expression most likely represent the functional mechanism of chronic pancreatitis variants in the CTRB1-CTRB2 locus
- P1-09 MiR-1290, miR-191-5p, and miR-21-5p in combination with laboratory tests as markers useful in differentiation of pancreatic cancer from chronic pancreatitis
- P1-10 mTORC1 and mTORC2 converge on the Arp 2/3 complex-mediated actin cytoskeleton regulation in promoting ADM formation
- P1-11 Mutations in CPA1 as a risk factor of pancreatic cancer
- P1-12 Mutations in the 5' upstream region of chymotrypsinogen C gene are not associated with chronic pancreatitis
- P1-13 Pancreatic stellate cell activation is mediated through the SIN3a/HDAC repressive complex
- P1-14 Proteolytic inactivation of mesotrypsin by chymotrypsin C protects SPINK1 from degradation
- P1-15 Role of common CASR variants in chronic pancreatitis
- P1-16 Retracted
- P1-17 The hippo pathway regulates pancreatic stellate cell proliferation and synthesis of extracellular matrix in a transforming growth factor-β1- and interferon-γ-dependent manner
- P1-18 The novel c.1120A>G (p.K374E) variant of the CPA1 gene cause misfolding-induced hereditary pancreatitis
- P1-19 The occurrence of prion protein in surgically resected pancreatic adenocarcinoma
- P1-20 Type and frequency of genetic mutations in patients suffering from recurrent and chronic pancreatitis

#### Acute and chronic pancreatitis, experimental I

- P1-21 Regulation of glucocorticoid receptor and p38 MAPK activation by hydrocortisone in mono- and co-cultured mouse pancreatic acinar cells and stellate cells
- P1-22 Role of NO synthases deficiency in the development of pancreatitis

- P1-23 The depletion of Foxp3+/CD25+ regulatory T cells drives a Th2 immune response and reduces severity in a mouse model of acute pancreatitis
- P1-24 The role of chymotrypsin-like protease in pancreatitis in mice
- P1-25 The role of Orai1 Ca<sup>2+</sup> channel in the pancreatic ductal epithelium cells under pathophysiological conditions
- P1-26 Therapeutic effect of recombinant human thrombomodulin on rat experimental severe acute pancreatitis
- P1-27 Thrombin generation in experimental acute pancreatitis
- P1-28 Utilizing tethered bilayers phospholipid membrane with heat shock protein-90 for early diagnosis in acute severe pancreatitis
- P1-29 VX-770 and VX-809 restore the alcohol-induced CFTR expression defect in pancreatic ductal cells
- P1-30 Dasatinib ameliorates pancreatic inflammation and fibrosis through inhibiting TKs/GSK3β/beta-catenin signaling pathway
- P1-31 Smad7 is required for normal macrophage function in experimental chronic pancreatitis
- P1-32 The role of IL-18 in pancreatic fibrosis

#### Pancreatic surgery I

- P1-33 Video-Assisted Retroperitoneal Debridement (VARD) in infected necrotizing pancreatitis – 12 year experience in the Netherlands
- P1-34 Pancreas-preserving duodenectomy as a treatment of choice for the isolated form of the cystic dystrophy of the duodenal wall (pure form of groove pancreatitis)
- P1-35 Surgery in chronic pancreatitis – A single center experience from Oslo
- P1-36 Results of portosystemic shunts during extended pancreatic resections
- P1-37 Safety and feasibility of enhanced recovery after surgery in patients undergoing pancreas resection and surgery drainage procedures for pancreatic cystic lesions
- P1-38 Pancreatic groove cancer
- P1-39 Patient-reported burden of intensified surveillance and surgery in high-risk individuals under pancreatic cancer surveillance
- P1-40 Personalized prognostic Bayesian network for pancreatic cancer: Delivering personalized pancreatic cancer management throughout the patient journey
- P1-41 Possibilities of laparoscopy in patients with chronic pancreatitis
- P1-42 Preoperative fecal elastase-1 (FE-1) adds value in predicting post-operative pancreatic fistula: not all soft pancreas share the same risk - A prospective analysis on 105 patients
- P1-43 Prognostic factors of survival in 196 patients undergoing duodeno-pancreatectomy for distal bile duct cancer
- P1-44 Prognostic significances of numbers of lymph nodes removed and positive nodes ratio in distal bile duct cancer: A multicenter cohort study
- P1-45 Quality of life and pancreatic exocrine and endocrine function in the long term follow-up after pancreaticoduodenectomy
- P1-46 Randomized controlled trial – Effects of high-dose pancreatic enzyme replacement therapy on body weight, nutritional status, and quality of life after pancreaticoduodenectomy
- P1-47 Risk factors of complications after laparoscopic pancreaticoduodenectomy



- P1-48 Robotic distal pancreatectomy: Comparison of spleen preservation by Warshaw technique and splenectomy
- P1-49 Surgical and oncological outcomes after neoadjuvant FOLFIRINOX chemotherapy for (borderline) resectable and locally advanced pancreatic cancer: A pan-European cohort
- P1-50 Survival length after pancreaticoduodenectomy for adenocarcinoma in correlation with preoperative CT characteristics and tumour resection margin assessment
- P1-51 The spleen volume might affect the occurrence of postoperative pancreatic fistula after distal pancreatectomy
- P1-52 The vulnerable point of modified Blumgart pancreaticojejunostomy regarding pancreatic fistula learned from 50 consecutive pancreaticoduodenectomies
- P1-53 Which factor is more influential on fatty liver after pancreatic resection, resective procedure or remnant pancreatic volume?

## Poster Session 2 (Thursday June 27th, 12:30-13:00)

### Pancreatic imaging

- P2-01 Clinical case of macroamylasemia on the background of splenosis
- P2-02 Minimally invasive treatment of pancreatic pseudocysts
- P2-03 Diffusion-weighted MRI for preoperative prediction of histologic response to preoperative therapy in patients with pancreatic cancer: A prospective phase II study (DIFFERENT trial)
- P2-04 Pancreatic stiffness and ultrasound attenuation coefficient in obese children
- P2-05 CT-based assessment of sarcopenia in patients with chronic pancreatitis using psoas muscle parameters: simple but sensitive
- P2-06 Systematic quantitative approach for assessment of imaging features in chronic pancreatitis patients: A feasibility and validation study
- P2-07 Muscle parameters measured by CECT during acute pancreatitis correlate with severity unlike parameters of un-involved fat depots
- P2-08 Diagnostic accuracy of computed tomography in chronic pancreatitis
- P2-09 Computed tomography and transabdominal ultrasound should be considered equal options as parts of the primary diagnostic workup for chronic pancreatitis
- P2-10 Endoscopic ultrasound-guided needle-based confocal laser endomicroscopy: Appraisal concerning in-vivo imaging of intraductal papillary mucinous neoplasm
- P2-11 Preoperative pancreatoduodenectomy risk prediction from radiologic features

### Acute pancreatitis, clinical I

- P2-12 Obesity in acute pancreatitis: a meta-analysis based on 9,997 patients
- P2-13 Prospective study of prediction of post-ERCP pancreatitis by post-ERCP serum amylase and lipase level
- P2-14 Persistent SIRS and non-alcohol etiology of AP are associated with oral feeding intolerance in AP: Results from an international, multicenter, prospective cohort study
- P2-15 The use of Early Achievable Severity (EASY) index is beneficial for rapid risk stratification in acute pancreatitis on hospital admission

- P2-16 Specific crystalloid solutions versus normal saline for acute pancreatitis (AP) – meta-analysis with trial sequential analysis
- P2-17 Recurrent acute pancreatitis is not uncommon in clinical setting
- P2-18 The prognostic role of fatty liver disease in acute pancreatitis: A meta-analysis
- P2-19 The management of biliary pancreatitis in a 36-weeks pregnant woman: case report
- P2-20 Predictive biomarkers of pancreatic necrosis in acute pancreatitis
- P2-21 Recurrent acute pancreatitis can be considered as early chronic pancreatitis: A meta-analysis of 21,186 patients
- P2-22 Protocol for early and safe patient discharge in acute pancreatitis
- P2-23 Systematic review of acute portal vein thrombosis after acute pancreatitis - Pathophysiology and treatment
- P2-24 The clinical usefulness of pentraxin 3 (PTX3) as predictor of acute pancreatitis and pancreatic cancer
- P2-25 Risk of acute pancreatitis after glucagon-like peptide-1 receptor agonists
- P2-26 Serum tissue factor/tissue factor pathway inhibitor ratio predicts non-mild acute pancreatitis
- P2-27 Severe acute pancreatitis following endoscopic mucosal resection
- P2-28 Prognostic and diagnostic role of abdominal pain on admission in acute pancreatitis
- P2-29 Outcomes and timing of endoscopic retrograde cholangiopancreatography for acute biliary pancreatitis
- P2-30 Value of local inflammatory markers for early diagnosis of infected walled-off pancreatic necrosis
- P2-31 Preliminary data of the PINEAPPLE-P study: 30-80% of acute pediatric pancreatitis is not diagnosed due to the low awareness
- P2-32 PINEAPPLE-R: Data analysis of 46190 pediatric patients
- P2-33 Serum triglyceride level dose dependently elevates the risk of local or systemic complications in acute pancreatitis: A multicenter international cohort analysis of 716 patients

### Chronic pancreatitis, clinical I

- P2-34 Zinc deficiency in patients with chronic pancreatitis
- P2-35 Regional gastrointestinal transit times in patients with chronic pancreatitis
- P2-36 Rituximab for the treatment of 15 patients with recurrent type 1 autoimmune pancreatitis
- P2-37 Pain modulatory phenotypes differentiate chronic pancreatitis patients with distinct clinical pain profiles
- P2-38 Patterns of smoking and alcohol use associate with the presence and temporal nature of pain in chronic pancreatitis
- P2-39 PPP (Panniculitis, Polyarthritis, Pancreatitis) syndrome – an unusual extra-pancreatic complication of chronic pancreatitis - solved by pancreatic head resection
- P2-40 The role of small intestinal bacterial overgrowth in patients with chronic pancreatitis
- P2-41 The first definition for early chronic pancreatitis
- P2-42 Pancreatic exocrine insufficiency in patients with Crohn's disease
- P2-43 Retracted
- P2-44 The role of metabolic syndrome in patients with chronic pancreatitis after the first attack of acute pancreatitis



- P2-45 Quantification of exocrine pancreatic function with short endoscopic secretin test in patients with chronic pancreatitis
- P2-46 Risk factors and nomogram for steatorrhea in idiopathic chronic pancreatitis
- P2-47 Structural pancreatic changes in chronic pancreatitis – Update on imaging data from the Scandinavian Baltic Pancreas Club (SBPC) database
- P2-48 Nutrition, exocrine function and enzyme treatment in chronic pancreatitis. The lesson learned from the Scandinavian-Baltic Pancreas Club database
- P2-49 Pacemaker of chronic pancreatitis - new approach for definition of the term
- P2-50 Natural history of Idiopathic Recurrent Acute Pancreatitis (IRAP): A prospective “real world” cohort study
- P2-51 Morphofunctional properties of erythrocytes in chronic pancreatitis combined with chronic obstructive pulmonary disease
- P2-52 Retrospective audit of outpatients with chronic pancreatitis at Newcastle Hospitals Foundation Trust

### Poster Session 3 (Thursday June 27th, 13:00-13:30)

#### Pancreatic cancer, clinical I

- P3-01 Updated international Cancer of the Pancreas Screening (CAPS) consortium guidelines on the management of patients with increased risk for familial pancreatic cancer
- P3-02 Prognostic implication of pN stage subdivision using metastatic lymph node ratio in resected pancreatic ductal adenocarcinoma
- P3-03 High-level expression of HOXB13 correlates with angiogenesis and unfavorable prognosis in human pancreatic carcinoma
- P3-04 Pancreatic fistula following neoadjuvant chemotherapy is an uncommon complication but has major impact on long-term survival
- P3-05 Nab-paclitaxel plus gemcitabine as first-line treatment for resectable/borderline resectable pancreatic cancer: a systematic review and meta-analysis
- P3-06 Pancreatic cancer in liver transplant recipients
- P3-07 The role of Hedgehog signaling pathway in aging process in pancreatic cancer
- P3-08 Staging of pancreatic ductal adenocarcinoma after neoadjuvant therapy: Reappraisal of the prognostic accuracy of the AJCC 8th edition
- P3-09 Predicting the future after pancreatectomy: A single pre-operative assay for prognosis on survival and thrombotic complications following surgery
- P3-10 Solitary needle tract seeding metastases following pancreatic cancer resections with previous EUS-FNA
- P3-11 Experiencing the diagnostic process of pancreatic cancer in the context of social isolation - A qualitative exploration with implications for further research
- P3-12 Implications of perineural invasion on disease recurrence and survival following pancreatectomy for pancreatic head ductal adenocarcinoma
- P3-13 Pancreatic metastases: experience of two Italian high-volume pancreatic surgical centres
- P3-14 Solid pseudopapillary tumours of the pancreas in four male patients

- P3-15 Prognostic role of the parenchymal frozen transection margin during pancreaticoduodenectomy for ductal pancreatic adenocarcinoma
- P3-16 Analysis of saliva metabolites to develop early detection system for pancreatic cancer
- P3-17 Searching for novel multimodal treatments in oligometastatic pancreatic adenocarcinoma: a case report
- P3-18 Pattern of recurrence, chemotherapy, and survival after pancreatoduodenectomy for ampullary and duodenal adenocarcinoma
- P3-19 Surgical, oncological and regional hemodynamic consequences of DP CAR. Lessons of 30 procedures without arterial reconstructions
- P3-20 Plasma suPAR in differentiating malignant and benign pancreatic masses.
- P3-21 The role of surgical resection in the era of FOLFIRINOX for advanced pancreatic cancer
- P3-22 Indolent evolution of a distal pancreatic adenocarcinoma with central osseous metaplasia managed by multivisceral resection, excisional biopsy of liver metastasis and adjuvant chemotherapy
- P3-23 Body composition in pancreatic cancer patients
- P3-24 Amount of resectable pancreatic cancer and postoperative pancreatic function
- P3-25 Postoperative deep vein thrombosis after pancreatectomy for cancer: A persistent problem lacking a mechanistic solution
- P3-26 Retracted
- P3-27 Patterns of cancers in families with confirmed pathogenic BRCA2 mutations
- P3-28 Disturbances in bioelements homeostasis as possible mechanism of cadmium pancreatic carcinogenicity
- P3-29 Investigation of novel predictive biomarkers in pancreatic ductal adenocarcinoma

#### Endocrine and cystic neoplasms I

- P3-30 Fine-needle aspiration of suspected pancreatic neuroendocrine tumors: a reliable tool to assess diagnosis and grading - A prospective single-center analysis of 100 cases
- P3-31 Advances in preoperative diagnosis and clinicopathological factors in panNET
- P3-32 Reappraisal of a 2 cm cut-off size for the management of cystic pancreatic neuroendocrine neoplasms: A multicenter international study
- P3-33 c-Myc promotes lymphangiogenesis and lymph node metastasis in pancreatic neuroendocrine tumors
- P3-34 A cure model survival analysis of patients affected by pancreatic neuroendocrine neoplasms: The Bologna ENETS Center experience
- P3-35 Small pancreatic cysts – are there a few good men?
- P3-36 Validation and head-to-head comparison of four models for predicting malignancy in intraductal papillary mucinous neoplasms of the pancreas: a study based on endoscopic ultrasound findings
- P3-37 Management algorithm for pancreatic cystic lesions
- P3-38 Comparison between transabdominal and endoscopic ultrasonography or the characterization of pancreatic cystic lesions
- P3-39 Comparison of 2012 and 2017 international consensus guideline in terms of mural nodule for predicting malignant intraductal papillary mucinous neoplasms



- P3-40 Accuracy of preoperative differential diagnosis with combination of neutrophil to lymphocyte index (NLI), CA 19-9 and computed tomography in malignant pancreatic cystic lesions (PCL)
- P3-41 Molecular characterization of early precursor lesions of pancreatic ductal adenocarcinoma

**Endoscopy I**

- P3-42 Comparison of 19-gauge versus 20-gauge fine needle biopsy needles for endoscopic ultrasound-guided sampling of solid pancreatic or peripancreatic masses
- P3-43 Combined endoscopic management of pancreatic fistula with infected peripancreatic collection
- P3-44 Feasibility and efficacy of a novel needle in endoscopic ultrasound-guided tissue sampling for pancreatic solid lesions: a prospective randomized comparative study
- P3-45 Efficacy of prophylactic pancreatic stent placement after endoscopic snare major papillectomy - A prospective, multicenter study
- P3-46 The role of "ROSE" for ERCP-guided brushing of indeterminate biliary strictures: Experience of a referral center
- P3-47 Indications and safety of endoscopic retrograde cholangiopancreatography in pediatric patients: Experience of a tertiary referral centre
- P3-48 Experience with EUS-guided biopsy using the puncture biopsy forceps
- P3-49 Experience from a low volume centre with LAMS – can transabdominal ultrasound help in determining the right time for endoscopic necrosectomy?
- P3-50 Retracted
- P3-51 Slow-pull compared to suction technique for EUS-guided sampling of pancreatic solid lesions: A meta-analysis of randomized controlled trials
- P3-52 Usefulness of preoperative endoscopic ultrasound-guided fine needle aspiration for distal pancreatic cancer
- P3-53 Experiences with endoscopic ultrasound-guided drainage of walled off pancreatic necrosis with lumen apposing metal or plastic stents

**Poster Session 4 (Thursday June 27<sup>th</sup>, 13:30-14:00)****Pancreatic cancer, experimental I**

- P4-01 Effects of RSK3 modulation on autophagy in pancreatic cancer
- P4-02 Apolipoprotein A2 isoform and CA19-9 as biomarkers for early detection of pancreatic cancer - A prospective evaluation by the EPIC study
- P4-03 Comparative quantitative proteomic profiling of neoadjuvantly treated versus treatment-naive human pancreatic ductal adenocarcinoma
- P4-04 Pharmacotyping pancreatic cancer patients with organoids
- P4-05 Peripheral blood leucocyte signaling in pancreatic cancer patients
- P4-06 Metabolic reprogramming of pancreatic cancer cells by protein arginine methyltransferase 3
- P4-07 Targeting pancreatic cancer-associated fibroblast vulnerabilities in link with their secretory phenotype
- P4-08 The role of IFIT3 in gemcitabine resistance of pancreatic cancer
- P4-09 The effect of sunitinib treatment assessed by intravital microscopy and DCE-MRI in PDAC xenografts

- P4-10 SF3B1 as a novel therapeutic target in pancreatic ductal adenocarcinoma: antitumoral effects of the splicing inhibitor Pladienolide B
- P4-11 Sensitive detection of plasma mutations using a novel tag-based error suppression sequencing method
- P4-12 Feasibility of a three-dimensional spheroid culture using endoscopic ultrasound-guided tissue sampling in pancreatic cancer
- P4-13 Metabolic regulation of calcium pumps in pancreatic ductal adenocarcinoma: role of phosphofructokinase-fructose-bisphosphatase-3 (PFKFB3)
- P4-14 Pancreatic stellate cells modify the metabolism of pancreatic ductal adenocarcinoma cells in vitro
- P4-15 Pancreatic heterospecies heterospheroids in cancer/stroma crosstalk investigation
- P4-16 Selective inhibition of sphingolipid metabolism in macrophages using acid sphingomyelinase inhibitor-coupled IL4 receptor specific aptamers
- P4-17 Cathepsin D expression mediates gemcitabine resistance in pancreatic cancer
- P4-18 Complex inhibition of innate immunity as a measure of parvoviral oncolytic activity in pancreatic cancer
- P4-19 Establishment and characterization of human PDAC-derived primary cancer cell lines
- P4-20 The functional relationship between PMCA4 and CAV-1 in MIAPaCa-2 pancreatic cancer cell line
- P4-21 Analyzing the impact of epigenetic profiles on the reprogramming efficiency in different pancreatic cancer subtypes
- P4-22 Exploring a new role for cytidine deaminase in pancreatic cancer metabolism
- P4-23 Tumor-stroma metabolic symbolism via the IL-17B/RB axis affects metastatic potential of pancreatic ductal adenocarcinoma
- P4-24 Aldo-keto reductase family 1 member B10 (AKR1B10), a metabolic target for gemcitabine resistance and metastasis of pancreatic cancer: Implications based on cancer stem cells and niche
- P4-25 Pancreatic stellate cell-derived citrate switches pancreatic cancer cell metabolism towards a more mitochondrial phenotype with minimal effects on bioenergetics and cytosolic Ca<sup>2+</sup> homeostasis

**Pancreatic pathology**

- P4-26 Periampullary gangliocytic paraganglioma
- P4-27 Hepatoid carcinoma of the pancreas
- P4-28 Pancreaticobiliary ductal anatomy
- P4-29 Features of histological structure of pancreas in patients with chronic pancreatitis (CP)
- P4-30 Morphological heterogeneity in pancreatic ductal adenocarcinoma is associated with structural and functional divergence in the cancer cell population and stroma
- P4-31 Azathioprine and mesalamine can impair pancreatic ductal bicarbonate secretion in mice
- P4-32 Squamous differentiation in EUS fine needle biopsies (FNBs) of pancreatic ductal adenocarcinoma (PDAC) - Is p40 immunohistochemistry of prognostic value?
- P4-33 Significance of intraoperative frozen section for surgical margins in pancreatic cancer
- P4-34 Pancreatic texture versus histopathology: what is the better predictor of postoperative pancreatic fistula? Exploratory analysis from a randomized trial



**Diabetes and exocrine/endocrine interactions**

- P4-35 Surgical technique and outcome of pancreas transplant - Experience of Taipei veterans
- P4-36 The change of glucose metabolism with GLP-1 after pancreatectomy
- P4-37 Are we missing cases of pancreatic exocrine insufficiency in hospitalised patients with high alcohol intake?
- P4-38 The emerging field of tissue engineering: An evidence gap map and systematic review of scaffold materials and scaffolding techniques for insulin-producing cells
- P4-39 Insulin receptor deletion in pancreatic acinar cells leads to impaired intestinal function: Possible link between diabetes and severity of pancreatitis
- P4-40 Comparison of methods for determining insulin resistance indexes of obese patients with coronary artery disease and chronic pancreatitis
- P4-41 Curcumin synergistically improves therapeutic efficacy of metformin
- P4-42 Management particularities of secondary diabetes mellitus due to chronic pancreatitis
- P4-43 1-deoxy-sphingolipids induce acinar cell dysfunctions and exacerbate acute pancreatitis following diabetes mellitus
- P4-44 Risk factors and nomogram for diabetes mellitus in idiopathic chronic pancreatitis
- P4-45 Diabetic ketoacidosis worsen the outcome of AP in childhood – preliminary results of APPLE (Analysis of Pediatric Pancreatitis) prospective, multicentric, observational clinical trial
- P4-46 Autonomic neuronal dysfunction in patients with diabetes mellitus and pancreatic exocrine insufficiency
- P4-47 Pancreatic exocrine acinar cells are stress-sensitive to high levels of glucose and insulin
- P4-48 Changes of lipid profile in patients with chronic pancreatitis and diabetes mellitus type 2
- P4-49 Exocrine pancreatic insufficiency in patients with fatty pancreas

**Poster Session 5 (Friday June 28th, 12:00-12:30)****Cell and molecular biology / physiology / genetics II**

- P5-01 New approach for the investigation of pancreatic ducts in mice
- P5-02 Composition of cAMP signaling elements in pancreatic ductal epithelial cells
- P5-03 Activated human pancreatic stellate cells: differential activation of mitogen-activated protein kinases associated with the obestatin/G-protein coupled receptor 39 (GPR39) signaling pathway
- P5-04 Investigation of bicarbonate secretion in human ductal organoid cell cultures
- P5-05 Characterization of the function of transient receptor potential melastatin 2 in mouse pancreas
- P5-06 Foetal pancreatic tissue as a model for human pancreatic ducts
- P5-07 GPRC6a is expressed in the plasma membrane and the nucleus of exocrine pancreas cells indicating an important role in cancer signaling
- P5-08 Crucial relationship of neural Wiskott-Aldrich syndrome protein (N-WASP) and lysyl oxidase-like 2 (LOXL2) in the promotion of pancreatic cancer metastasis
- P5-09 Exocrine pancreatic function, genetic variants, and risk factors in a cohort of subjects with chronic pancreatitis
- P5-10 A multifactorial score for pancreatic ductal adenocarcinoma risk prediction

- P5-11 KRAS mutation analysis by droplet digital PCR of duodenal juice from patients with pancreatic diseases
- P5-12 Aberrant N- and O-linked glycosylation in carboxyl ester lipase (CEL) protein variants involved in MODY8 syndrome and chronic pancreatitis
- P5-13 Genetic basis of chronic pancreatitis in 300 Polish pediatric patients: An attempt to classify the genotypes into causative and contributory
- P5-14 A Mendelian randomization analysis of known and putative risk factors for pancreatic cancer
- P5-15 Genetic analysis in two monozygotic twins with degenerated IPMN
- P5-16 CFTR expression analysis for subtyping of human pancreatic cancer organoids
- P5-17 Genetic factors of chronic pancreatitis in Russian population
- P5-18 Epigenetic expression of MUC5AC in metastatic pancreatic patients using RNA-scope technology and immunohistochemistry
- P5-19 Adiponectin and leptin content in patients with comorbid course of pancreatic steatosis and nonalcoholic steatohepatitis
- P5-20 Assessing the clinical significance of PRSS1 intronic variants

**Acute and chronic pancreatitis, experimental II**

- P5-21 Depletion of cathepsin C ameliorates severity of acute pancreatitis by reduced activation of elastase in neutrophil granulocytes
- P5-22 Breach of tolerance to the autoimmune component in pancreatitis in rats
- P5-23 Interleukin 33 regulates Th2 T-cell differentiation and macrophage polarization during acute pancreatitis
- P5-24 Acinar Akt1 in pancreatic acinar cells supports proliferation and limits acinar-to-ductal metaplasia formation upon induction of acute pancreatitis
- P5-25 Insulin protects acinar cells during cellular and animal models of acute pancreatitis: Role of Akt-mediated phosphorylation of the glycolytic enzyme PFKFB2
- P5-26 Degradation of cystatin C, an endogenous cathepsin inhibitor, stabilizes cathepsin B activity within pancreatic zymogen granules
- P5-27 Noninvasive measurement of intra-abdominal hypertension in murine model of acute pancreatitis
- P5-28 Glyoxalase-I is upregulated in acute cerulein-induced pancreatitis: A new mechanism in pancreatic inflammation?
- P5-29 Pitfalls in the AR42J-model of cerulein-induced acute pancreatitis
- P5-30 Dimethyl-trisulfide: new approach to ameliorate experimental acute pancreatitis
- P5-31 Fentanyl treatment reduces the severity of necrotizing acute pancreatitis in rats
- P5-32 Kynurenic acid analogue SZR-72, but not SZR-73, SZR-81 and SZR-104 treatment moderates the severity of acute necrotizing pancreatitis in rats

**Pancreatic cancer, clinical II**

- P5-33 Prognostic significance of nutritional and inflammatory markers in patients with unresectable pancreatic ductal adenocarcinoma treated with chemotherapy
- P5-34 Lymph node ratio as valuable predictor in pancreatic cancer treated with R0 resection and adjuvant treatment
- P5-35 Pancreatic cancer surveillance program does not impact negatively on the psychological status of subjects enrolled



- P5-36 Investigation on the frequency of the combination of the pancreatic malignant tumors and the methods of follow-up of patients with IPMN
- P5-37 Prognostic impact of minimal pelvic fluid in pancreatic cancer Stage III
- P5-38 The human equilibrative nucleoside transporter1 evaluated by SP120 and 10D7G2 had the potential to predict the prognosis in the patients with pancreatic cancer treated with adjuvant gemcitabine: Collaborative study of the JASPAC 01 trial
- P5-39 Can digital skeletal muscle index predict palliative chemotherapy uptake before patients undergo endoscopic pancreatic biopsy?
- P5-40 Immunohistochemical pattern of liver metastases and paired sample analysis in patients with metastatic pancreatic cancer: Pronounced CDX2 expression and loss of SMAD4 indicate poor survival
- P5-41 New possibilities of pancreatic cancer differential diagnosis
- P5-42 The effect of neoadjuvant FOLFIRINOX and gemcitabine/nab-paclitaxel in elderly patients suffering from pancreatic cancer – Results of the RESPECT-Study
- P5-43 Multicenter, retrospective study to assess the efficiency of different preoperative chemotherapy regimes for borderline resectable and locally advanced pancreatic cancer – Results of the RESPECT-Study
- P5-44 Pancreatic cancer risk in relation to lifetime smoking patterns, tobacco type, and dose-response relationships
- P5-45 Association of adiponectin levels and tumor stage in pancreatic adenocarcinoma patients
- P5-46 Prognostic factors for predicting early recurrence within the first year of surgery in pancreatic ductal adenocarcinoma
- P5-47 Clinical outcomes of conversion surgery after neoadjuvant chemotherapy in patients with borderline resectable and locally advanced unresectable pancreatic cancer: A single-center, retrospective analysis
- P5-48 Systemic treatment could predict satisfactory long-term results after surgical resections in recurrent and metastatic pancreatic cancer
- P5-49 MolPac – An interim analysis towards targeted therapy
- P5-50 Inflammatory serum markers predict pancreatic cancer survival
- P5-51 Early diagnosis of pancreatic cancer with metabolite biomarkers in new-onset diabetes mellitus-New Onset of Diabetes in the Elderly Study (NODES)
- P5-52 The impact of UGT1A1 polymorphisms on treatment toxicities from liposomal irinotecan (PEP02, nal-IRI)
- P5-53 Porphyrins as urinary biomarkers for pancreatic cancer after 5-aminolevulinic acid administration
- P5-54 Pancreatic tumours in children
- P5-55 Treatment of the elderly patients with advanced pancreatic cancer
- P5-56 Comparison of efficacy between adjuvant chemotherapy and chemoradiation therapy after R0 resection for pancreatic ductal adenocarcinoma
- P5-57 Effect of clinical status on survival in patients with borderline or locally advanced pancreatic adenocarcinoma
- P5-58 Activated stroma index in neoadjuvantly treated patients with pancreatic ductal adenocarcinoma

- P5-59 12 Years of prospective pancreatic cancer surveillance: Results of the Dutch nationwide program in high-risk individuals
- P5-60 Elevated Ca 19-9 predicts the presence of metastatic aortocaval lymph nodes and impaired survival in resected patients with borderline and locally advanced pancreatic cancer
- P5-61 Search for new predictive/prognosis biomarkers (BKs) in potentially resectable pancreatic adenocarcinoma (PDAC)
- P5-62 Malignified IPMN and PDAC have comparable overall survival: A western single center cohort study
- P5-63 Thrombocytosis in intraductal papillary mucinous neoplasm of pancreas
- P5-64 Do nab-Paclitaxel and FOLFIRINOX improve the outcome of the pancreatic cancer chemotherapy in the real world?
- P5-65 Recurrence after resection for pancreatic cancer: the role of (re)-surgery
- P5-66 Resection margins in pancreatic ductal adenocarcinoma (PDAC) operations: Is one millimeter enough? Meta-analysis and a systematic review
- P5-67 Tumor budding morphomic analysis in periaampullary and pancreatic cancer reveals prognostic information
- P5-68 Detection methods for circulating tumor cells in the blood of patients with pancreatic cancer in a pre-operative setting
- P5-69 Clinical and pharmacological factors associated with cancer recurrence in operated IPMN patients

## Poster Session 6 (Friday June 28th, 12:30-13:00)

### Endocrine and cystic neoplasms II

- P6-01 Association between preoperative vasostatin-1 and pathological features of aggressiveness in localized nonfunctioning pancreatic neuroendocrine tumors (NF-PanNET)
- P6-02 Management of small asymptomatic nonfunctioning pancreatic neuroendocrine tumors: from guidelines to real life
- P6-03 Resection margins in pancreatic neuroendocrine neoplasms
- P6-04 Clinical validation of the 2017 international consensus guidelines on intraductal papillary mucinous neoplasm of the pancreas
- P6-05 Incidental pancreatic cystic neoplasms: detection of malignancy
- P6-06 Recurrence pattern after surgical resection for intraductal papillary mucinous neoplasm
- P6-07 Utility of EUS - FNA in the cystic dystrophy in heterotopic pancreas
- P6-08 Omental cystic lymphangioma mimicking cystic pancreatic tumor in a patient with multiple sclerosis on immunomodulatory therapy
- P6-09 Immediate on-site diagnosis of mucinous pancreatic lesions by glucometric analysis of cystic fluid obtained by endoscopic ultrasound-guided fine needle aspiration (EUS-FNA)
- P6-10 A diagnostic algorithm to predict malignant potential of pancreatic intraductal papillary mucinous neoplasms
- P6-11 The role of endoscopic ultrasound-guided through-the-needle microforceps biopsy in the diagnosis of pancreatic cystic lesions
- P6-12 The European evidence-based guidelines on pancreatic cystic neoplasms (PCN) in clinical practice: the development of relative and absolute indications for surgery during prospective IPMN surveillance



**Pancreatic surgery II**

- P6-13 Making personalized predictions of poor outcome post resection of pancreatic ductal adenocarcinoma (PDAC): a prognostic Bayesian network with pre- and post-operative application
- P6-14 Can Hemopatch™ help for preventing pancreatic fistula?
- P6-15 Identification of the risk factors of pancreatic exocrine insufficiency after pancreatoduodenectomy using <sup>13</sup>C-labeled mixed triglyceride breath test
- P6-16 Duodenum-preserving pancreatic head resection for paraduodenal (groove) pancreatitis treatment
- P6-17 Impact on survival and recurrence of positive histological resection after pancreatoduodenectomy in patients with lymph node invasion: an international multicentric study
- P6-18 A single surgeon's learning curve of pure laparoscopic pancreatoduodenectomy: A risk-adjusted CUSUM analysis
- P6-19 Bile bacterial isolation in stent-bearing patients undergoing pancreatoduodenectomy: Much ado about nothing?
- P6-20 A comparison of minimal invasive versus open pancreaticoduodenectomy for pancreatic ductal adenocarcinoma in single institution: propensity score matching analysis
- P6-21 Laparoscopic or open Frey procedure – selection criteria
- P6-22 Impact of remnant pancreatic volume and amylase level of pancreatic juice on short- and long-term functional and survival outcomes after pancreatoduodenectomy
- P6-23 Multimodal programme of enhanced recovery following pancreaticoduodenectomy
- P6-24 Experience of laparoscopic pancreaticoduodenectomy in a regional centre
- P6-25 Clinical validation of scoring systems of postoperative pancreatic fistula after pancreatoduodenectomy: Applicability to Eastern cohorts?
- P6-26 IRE is a safe and feasible treatment for unresectable local recurrence of pancreatic ductal adenocarcinoma
- P6-27 Extended pancreatectomy in patients with pancreatic cancer
- P6-28 Mechanical jaundice in the follow-up period after duodenum-preserving resections of the head of the pancreas
- P6-29 Functional aspects of chronic pancreatitis surgical therapy
- P6-30 Open surgical treatment of 33 duodenal neuroendocrine neoplasms
- P6-31 Retracted
- P6-32 One-stage middle-preserving pancreatectomy: indications and results
- P6-33 Efficacy of minimally invasive step-up approach surgical interventions in patients with complicated acute necrotizing pancreatitis
- P6-34 Classical vs. pylorus-preserving pancreaticoduodenectomy: A “natural” cohort comparison between Germany and Egypt
- P6-35 Forty-five spleen-preserving distal pancreatectomy with splenic vessels resection without splenectomies. Which arteries can we rely on?
- P6-36 Advanced age and high American Society of Anesthesiologists' risk score do not increase perioperative mortality in pancreatic resections: a view from a tertiary care center
- P6-37 Clinical impact of routine somatostatin analogues administration after pancreatoduodenectomy: a case-matched comparison according to fistula risk score, ASA and surgical technique

- P6-38 Long-term oncological outcomes of laparoscopic pancreatoduodenectomy
- P6-39 Initial experiences with the procedure of pylorus preserving duodenopancreatectomy with pancreaticogastrostomy in the Clinical Center of Serbia
- P6-40 Long-term results after surgery for chronic pancreatitis in Finland
- P6-41 Comparison of Blumgart anastomosis versus other conventional pancreaticojejunostomy techniques: A single center propensity score matching analysis
- P6-42 Chemotherapy and subsequent Stereotactic Body RadioTherapy (SBRT) as a multimodal neoadjuvant approach for selected borderline resectable/locally advanced pancreatic adenocarcinoma

**Chronic pancreatitis, clinical II**

- P6-43 Digestive intestinal enzymes production disorders in chronic pancreatitis (CP)
- P6-44 Frequency of exocrine pancreatic insufficiency (EPI) and changes of the main pancreatic duct (MPD) in patients with inflammatory bowel disease (IBD)
- P6-45 Data of psychogeometric testing in patients with chronic pancreatitis (CP)
- P6-46 Functional thyroid disorders upon exocrine pancreatic insufficiency (EPI) in patients with chronic pancreatitis (CP)
- P6-47 Kidney involvement in patients with type 1 autoimmune pancreatitis
- P6-48 Lung involvement in patients with autoimmune pancreatitis
- P6-49 Applicability of a checklist for the diagnosis and treatment of severe Exocrine Pancreatic Insufficiency (EPI). Preliminary results of an EPI Italian registry (EPIItaly)
- P6-50 Identifying reduced pancreatic function and fat malabsorption in patients with chronic pancreatitis and the impact of short-term pancreatic enzyme replacement therapy
- P6-51 Can serum nutritional markers be used for diagnosing pancreatic exocrine insufficiency in at risk groups?
- P6-52 First clinical reports on CEL-HYB pancreatitis: Synergism between protein misfolding and other risk factors?
- P6-53 Intermittent fasting/nutrition in case of fatty pancreas disease
- P6-54 IgG4-related disease responder index but not serum IgG4 correlates with disease activity and the risk of 1-year relapse in type 1 autoimmune pancreatitis
- P6-55 A novel method for assessment and characterization of pancreatic pain
- P6-56 Analysis of toxic-metabolic risk factors of chronic pancreatitis in a large pediatric cohort
- P6-57 Chronic pancreatitis in combination with ischemic heart disease: changes in cytokine immune response
- P6-58 Autoimmune pancreatitis relapses: our long-term experience with Rituximab
- P6-59 Chronic Pancreatitis Prognosis Score (COPPS): preliminary results from a prospective multicenter, international validation study
- P6-60 Measures of fecal fat absorption with current methods in a healthy population
- P6-61 Investigating the early phase of chronic pancreatitis: the Goulash-Plus trial protocol and the results of the first 10 months
- P6-62 Clinical characteristics of chronic pancreatitis in an out-patient clinic
- P6-63 Effect of medical intervention in patients with chronic pancreatitis and decreased bone mineral density
- P6-64 Care for patients with chronic pancreatitis is suboptimal in all domains covered by the HaPanEU-guideline



- P6-65 Condition of intestinal patients with chronic pancreatitis with external necessary insufficiency with related osteoarthritis
- P6-66 Clinical characteristics of smoking-related chronic pancreatitis
- P6-67 Clinical significance of interleukin-6 in severity and relapse in type 1 autoimmune pancreatitis
- P6-68 Features of pancreatitis associated with ulcerative colitis: a case series analysis
- P6-69 Efficiency of lipoic acid in treatment of the combined course of chronic pancreatitis and diabetes mellitus type 2

## Poster Session 7 (Friday June 28th, 13:00-13:30)

### Acute pancreatitis, clinical II

- P7-01 Crosstalk between hyperglycemia, inflammation and coagulation in severe acute pancreatitis
- P7-02 Drug-induced acute pancreatitis
- P7-03 Energy expenditure and loss of muscle and fat mass in patients with walled-off pancreatic necrosis: a prospective study
- P7-04 Disturbance of consciousness is associated with higher severity and mortality of acute pancreatitis
- P7-05 CT-severity index can predict the severity of acute pancreatitis similar than other scoring systems
- P7-06 Metabolic syndrome factors elevate the risk for severity, mortality, and complications in acute pancreatitis
- P7-07 Alcohol consumption and smoking synergize with each other and increase the risk of local complications and severity in acute pancreatitis
- P7-08 Aging or comorbidities in acute pancreatitis: Which one is the bad guy?
- P7-09 Effect of age on severity and outcomes of pancreatitis in Korean patients with acute gallstone pancreatitis
- P7-10 Acute pancreatitis induced by transarterial chemoembolization
- P7-11 Hypertriglyceridemia-induced acute pancreatitis: Features from a global cohort study (APPRENTICE)
- P7-12 Does obesity affect severity and outcomes of pancreatitis in Korean patients with acute gallstone pancreatitis
- P7-13 EarLy Elimination of Fatty Acids in acute pancreatitis (ELEFANT trial): Protocol of a multicentre randomized clinical trial
- P7-14 Differences in clinical features and outcomes of hypertriglyceridemia induced acute pancreatitis: A propensity score matched analysis from prospective pancreatitis registry
- P7-15 LIFESStyle, prevention and risk of acute PANcreatitis (LIFESPAN): Protocol of a prospective, multi-centre and multinational observational case-control study
- P7-16 Local administration of antibiotics through nasocystic catheter for the treatment of infected pancreatic necrosis (IPN)
- P7-17 A multicenter, international cohort analysis of 1435 patients to support clinical trial design in acute pancreatitis
- P7-18 Minimally-invasive methods of acute pancreatic postnecrotic pseudocysts treatment
- P7-19 Antibiotic therapy in acute pancreatitis: from global overuse to evidence based recommendations
- P7-20 Diagnosis of disrupted and disconnected duct in acute pancreatitis: a systematic review

- P7-21 Characterization of oxidative stress in acute pancreatitis
- P7-22 Evidence-based management therapy in acute pediatric pancreatitis decrease the length of hospitalization
- P7-23 Comparison of new systems for predicting the severity of acute pancreatitis
- ### Pancreatic cancer, experimental II
- P7-24 In vitro optimisation of sonoporation conditions in pancreatic cancer
- P7-25 The effect of endoscopic ultrasound-guided irreversible electroporation of pancreas: An experimental study in porcine model
- P7-26 Heterogeneity of human pancreatic adenocarcinoma (PDAC) cancer-associated fibroblasts (CAF): subtype-A (periostin-positive) CAF is associated with aggressive tumor features and is an early CAF
- P7-27 Obesity promotes tumor growth and induces transcriptomic and epigenomic changes in a murine pancreas cancer model
- P7-28 Germline DNA-repair genetic background in long-term survivors of pancreatic ductal adenocarcinoma
- P7-29 Impact of Tlr3 on acinar-to-ductal metaplasia and pancreatic cancer progression
- P7-30 RSK3 as a synthetic lethal target in pancreatic cancer – molecular characterization and therapeutic inhibition
- P7-31 Biological role of perineural invasion in pancreatic ductal cancer
- P7-32 Neurons chemoattract cancer cells via MCP-1-CCR4-induced paxillin phosphorylation and activation in the cancer cell cytoskeleton
- P7-33 The cellular proteome of pancreatic ductal adenocarcinoma
- P7-34 Of mice and men: parallel analysis of pancreatic cancer tumours and patient-derived mouse models by next-generation sequencing
- P7-35 Significance of bile acids in pancreatic cancer
- P7-36 Tumor suppressive mechanisms of Gastrokine 1 in pancreatic carcinogenesis
- P7-37 Sonoporation and gemcitabine delivery in pancreatic cancer cell lines
- P7-38 Role of intracellular cytidine deaminase activity for gemcitabine metabolism in pancreatic cancer cell lines
- P7-39 Gastrokine 2 delays the development of pre-malignant PanIN lesions
- P7-40 A distinctive miRNA expression profile characterizes aggressive pancreatic cancer
- P7-41 PDAC-associated fibroblasts are less responsive to an anti-fibrotic stimulus and more responsive to a positive regulator of fibroblast activation than normal activated fibroblasts
- P7-42 An innovative patient-derived xenograft model of pancreatic ductal adenocarcinoma for drug and biomarker discovery
- P7-43 Transcriptional interplay between ARID1A and EGFR signaling in pancreatic acinar cell reprogramming
- P7-44 Preliminary experience with xenotransplantation of pancreatic cancer samples in zebrafish embryos: towards personalized medicine
- P7-45 Anterior gradient 2 promotes early pancreatic carcinogenesis by suppressing p53 function
- P7-46 Cholinergic signaling directly and indirectly suppresses pancreatic tumorigenesis and cancer stemness



- P7-47 HSP27 regulates the Hippo pathway and thereby promotes metastasis in pancreatic ductal adenocarcinoma
- P7-48 Targeting tumor intrinsic metabolic node in pancreatic cancer causes tumor regression, remodels extracellular matrix and sensitizes to anti-PD1 therapy
- P7-49 Establishment of a novel adjuvant model of orthotopic pancreatic cancer: Effects of HGF-cMET inhibition on disease progression
- P7-50 Development of PDAC organoids on decellularized extracellular matrices
- P7-51 Vitamin D modulates migration and activation of pancreatic stellate cells and tumor-stroma crosstalk in pancreatic cancer
- P7-52 The obestatin/G-protein coupled receptor 39 (GPR39) system in pancreatic cancer: proliferation studies in pancreatic cancer cell lines
- P7-53 2-HF sensitizes human pancreatic cancer cells to EGFR inhibitors by inhibiting the STAT3 pathway
- P7-54 RASAL2 activates RAC1 pathway to promote pancreatic cancer progression
- P7-55 Development of a biomarker panel risk score, PancRISK, for early detection of pancreatic cancer
- P7-56 High glucose microenvironment accelerates tumor growth via SREBP1-autophagy axis in pancreatic cancer
- P7-57 Molecular mechanisms of sonoporation in pancreatic ductal adenocarcinoma (PDAC)
- P7-58 Mitochondria as a potential target for cadmium toxicity in the development of pancreatic cancer
- P7-59 Aldh1a3 labels a subtype of cancer-associated fibroblasts with inflammatory phenotype in pancreatic ductal adenocarcinoma

### Endoscopy II

- P7-60 Impact of the type and size of periampullary diverticulum for post-ERCP pancreatitis
- P7-61 Management of symptomatic pancreatic fluid collections using a lumen-apposing metal stent on an electrocautery-enhanced delivery system – Our preliminary observations of step-up endoscopic treatment
- P7-62 Retracted
- P7-63 Endoscopic vs. Surgical Ampullectomy vs. Pancreatoduodenectomy (ESAP) for ampullary neoplasm – a Pancreas2000/EPC study group
- P7-64 Endoscopic treatment of patients with chronic pancreatitis
- P7-65 ERCP is more challenging in cases of acute biliary pancreatitis than in acute cholangitis – an analysis of the Hungarian ERCP Registry data
- P7-66 Endoscopic management of clinically relevant postoperative pancreatic fistula after distal pancreatectomy – a retrospective cohort study
- P7-67 Timing of indomethacin suppositories for the prevention of post-ERCP pancreatitis – from the pathomechanism to the optimal therapy. Protocol of a randomized, double-blind, two-armed, non-inferiority study (PEPPER)
- P7-68 Transpancreatic sphincterotomy: a valuable technique to gain biliary access
- P7-69 Early prediction of the relapse of bleeding from acute gastroduodenal ulceration in patients with chronic pancreatitis
- P7-70 Double pigtail plastic stents are cheaper and as effective as lumen apposing metal stent for the endoscopic drainage of walled-off necrosis: A case-control study

## SATELLITE MEETINGS

Thursday June 27<sup>th</sup> 2019

- 07.00-08.15 Pancreatology Editorial Board Meeting**  
Hotel Zander K, ground floor (only members of the board)
- 07.15-08.15 YOUPIIE Breakfast with the Mentor**  
Grieghallen – room Nina
- 12.15-13.15 Industry Symposium, Grieghallen – Peer Gynt-salen**
- 12.15-14.00 IAP Council Meeting, Hotel Scandic Ørnen, meeting room on 13th floor**

Friday June 28<sup>th</sup> 2019

- 07.00-08.30 EPC Council Meeting**  
Hotel Scandic Ørnen, meeting room on 13th floor
- 12.00-13.30 ESPAC Meeting**  
Grieghallen – room Svane
- 12.15-13.30 UEG Autoimmune Pancreatitis Guidelines Meeting**  
Grieghallen – room Nina
- 12.00-12.55 Industry Symposium**  
Grieghallen – room Klokkeklang





*51<sup>st</sup> Meeting of the*  
**European Pancreatic Club**  
June 26-29<sup>th</sup>, 2019  
Bergen, Norway

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## Mylan Symposium

### Multidisciplinary management of pancreatic cancer

Thursday, June 27<sup>th</sup>; 12:15 – 13:15. Room: Peer Gynt-salen

#### Chairmen:

**J. Enrique Dominguez-Muñoz**, Gastroenterologist, Head of Gastroenterology and Hepatology Department, University Hospital of Santiago de Compostela, Spain

**Matthias Löhr**, Gastroenterologist, Professor of Gastroenterology & Hepatology Karolinska Institute, Center for Digestive Diseases, Karolinska University Hospital, Stockholm, Sweden.

### Any chance for early detection?

Vinciane Rebours, Pancreatology Unit, Beaujon Hospital, Clichy, Paris, France

### Neoadjuvant therapy or upfront surgery for resectable pancreatic cancer?

Helmut Friess, Department of Surgery, TUM School of Medicine, Klinikum Rechts der Isar, Technical University Munich, Munich, Germany

### Personalized tumor therapy: where are we now and where are we going?

Alfredo Carrato, Professor & Director, Medical Oncology Department, Ramon y Cajal University Hospital, Alcala University, Madrid, Spain

### Nutritional support and pancreatic enzyme replacement therapy

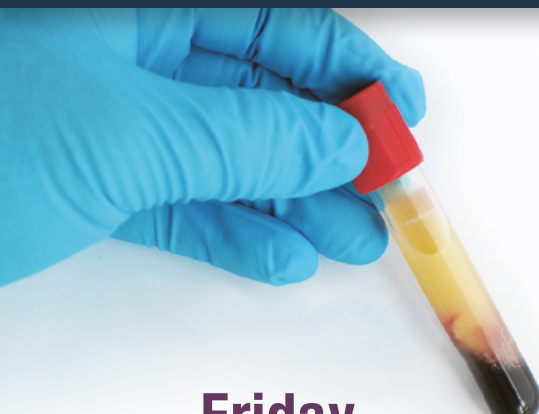
Mary Phillips, Advanced Specialist Dietitian (Hepato-pancreatico-biliary surgery), Royal Surrey County Hospital, Guildford, UK.





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OF THE EUROPEAN PANCREATIC CLUB

# SEVERE HYPERTRIGLYCERIDEMIA: A DIFFERENT KIND OF PANCREATITIS



**Friday,  
June 28th, 2019  
12:00 PM – 12:55 PM**

**Location: Grieghallen  
Room: Klokkeklang  
Lunch will be provided**

This event is not being certified for CME/CE credit.  
There are no additional fees to attend once you have  
registered for the 2019 EPC Congress.

## SPEAKERS



**PROF. VINCIANE REBOURS**  
Associate Professor – Hospital Practitioner  
Beaujon Hospital  
France



**PROF. MARKUS LERCH**  
Professor and Chairman,  
Department of Medicine  
University of Greifswald  
Germany



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- Diagnosis/exclusion of pancreatic involvement in association with gastrointestinal symptoms: e.g., Maldigestion (Stearorrhoea/Diarrhoea), Abdominal Pain or 'Failure to Thrive'
- Diagnosis/exclusion of exocrine pancreatic insufficiency in: e.g., Chronic Pancreatitis, Cystic Fibrosis, Diabetes, Coeliac Disease, Irritable Bowel Syndrome (IBS), Inflammatory Bowel Diseases (IBD), Cholelithiasis (Gallstones), Osteoporosis or Papillary Stenosis

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## Creon Abbreviated Prescribing Information from SmPC 20 January 2018.

**Indications:**<sup>1</sup> Pancreatic exocrine insufficiency with malabsorption in children and adults.

**Selected safety information:**<sup>2</sup> Strictures of the ileo-cecum and large intestine (fibrosing colonopathy) have been reported in patients with cystic fibrosis taking high doses of pancreatin preparations.

Unusual abdominal symptoms or changes in abdominal symptoms should be medically assessed to exclude the possibility of intestinal injury, especially if the patient is taking more than 10 000 units of lipase/kg/day.

**Creon 10 000® Creon 25 000® Creon 40 000®**

**Digestive enzymes.** ATC code.: A09A A02

**Gastro-resistant capsules: Creon 10 000:** Each capsule contains: Pancreatin equivalent to lipase 10,000 Ph.Eur. units, amylase 8,000 Ph.Eur. units, protease 6,00 Ph.Eur. units., excipients. Coloring agent: Iron oxides (E 172).

**Gastro-Resistant Capsules: Creon 25 000:** Each capsule contains: Pancreatin equivalent to lipase 25,000 Ph.Eur. units, amylase 18,000 Ph.Eur. units, protease 1,000 Ph.Eur. units., excipients. Coloring agent: Iron oxides (E 172.).

**Gastro-Resistant Capsules: Creon 40 000:** Each capsule contains: Pancreatin equivalent to lipase 40,000 Ph.Eur. units, amylase 25,000 Ph.Eur. units, protease 1,600 Ph.Eur. units., excipients. Coloring agent: Iron oxides (E 172).

**Indications:** Pancreatic exocrine insufficiency with malabsorption in children and adults, often associated with, but not limited to, pancreatitis, cystic fibrosis, pancreatic cancer, pancreatic surgery, gastrectomy, acute pancreatitis, gastrointestinal bypass surgery (e.g. Billroth II gastroenterostomy), obstruction of bile ducts or the common bile duct (e.g. neoplasms) and/or Shwachman-Diamond syndrome.

**Dosing:** Adjusted according to weight, grade of indigestion, severity of disease, control of steatorrhea, and also diet composition (especially fat content) and maintaining a healthy diet. Treatment should not be discontinued without consulting a physician. The patient should report on steatorrhea and gastrointestinal problems as the dose may need to be adjusted. Many patients must take this product as a lifelong treatment. **Cystic fibrosis:** Most patients should not take more than 10,000 units of lipase/kg bw/day or 4,000 units of lipase/gram fat intake. **Adults, adolescents and children >4 years:** Recommended starting dose is 500 units of lipase/kg/meal. **Children <4 years:** Recommended starting dose is 1000 lipase units/kg/meal. **Conditions associated with pancreatic exocrine insufficiency, excluding cystic fibrosis:** The needed dose per one meal varies from approx. 25,000-80,000 Ph.Eur units of lipase, equivalent to 1-3 capsules of Creon 25,000 per meal, and half of one dose per snack meal. Creon 40,000 can be used when taking high doses. **Administration:** Adequate hydration at all times is important, especially at times with increased fluid loss. Inadequate hydration can worsen constipation. The capsules should be taken during or straight after a meal. Capsules should be swallowed whole with plenty of liquid. Should not be chewed or crushed. Upon swallowing difficulties (e.g. young children and elderly) the capsules may be carefully opened and the minimicrospheres mixed with acidic, soft food (pH <5.5) that does not need to be chewed, e.g. apple sauce or yoghurt. Alternatively, they can be mixed with acidic liquid like fruit juice (pH <5.5), e.g. apple, orange or pineapple juice. If mixed with fluid or food it is important that mixture is taken immediately and not stored. Crushing or chewing the minimicrospheres, or mixing with food or liquid with pH >5.5 can disrupt the protective coating. This can result in early release of enzymes in the oral cavity and may lead to reduced efficacy and irritation of the mucous membranes. Care should be taken to ensure that no product is retained in the mouth.

**Contraindications:** Hypersensitivity to the active substance or to any of the excipients.

### References:

- 1: Creon SmPC (20.01.2018) Section 4.1
- 2: Creon SmPC (20.01.2018) Section 4.4



**Precautions:** Strictures of the ileo-cecum and large intestine (fibrosing colonopathy) have been reported in patients with cystic fibrosis taking high doses of pancreatin preparations. Unusual abdominal symptoms or changes in abdominal symptoms should be medically assessed to exclude the possibility of intestinal injury, especially if the patient is taking more than 10 000 units of lipase/kg/day.

**Pregnancy, lactation and fertility:** Should be used in doses sufficient to provide adequate nutritional status in pregnant and lactating women. **Pregnancy:** Little experience on use during pregnancy. Caution should be exercised when prescribing to pregnant women. **Lactation:** Can be used during breastfeeding as no effects on the breastfed child are anticipated.

**Side effects:** The most commonly reported adverse reactions were gastrointestinal disorders, mild or moderate in severity, most commonly associated with the underlying condition.

**Very common (≥1/10):** Gastrointestinal: Abdominal pain.

**Common (≥1/100 til <1/10):** Gastrointestinal: Nausea, vomiting, constipation, abdominal distension, diarrhoea. **Uncommon (≥1/1,000 til <1/100):** Skin: Rash. **Frequency not known:**

Gastrointestinal: Strictures of the ileo-caecum and large intestine (fibrosing colonopathy) have been reported in patients with cystic fibrosis taking high doses of pancreatin preparations. Skin: Pruritus, urticaria. Immune system: Hypersensitivity (anaphylactic reactions) and allergic reactions.

**Overdose/Poisoning:** Excessive use of pancreatin have been reported to be associated with hyperuricosuria and hyperuricaemia. See recommendations on digestives from the National Poisons Information Centre (Giftninformasjonen), including enzymes A09 on [www.felleskatalogen.no](http://www.felleskatalogen.no).

**Characteristics:** **Classification:** Multienzymes (lipase, amylase, protease). **Mechanism of action:** Substitution for natural digestive enzymes. Pancreatic lipase cleaves fat to monoglycerides and free fatty acids. Pancreatic amylase and protease cleave carbohydrates and proteins to smaller units (di- and monosaccharides, oligopeptides and amino acids). Contains pancreatin produced of porcine origin and formulated as enteric-coated (acid-resistant) minimicrospheres within gelatine capsules. The capsule dissolves rapidly in the stomach releasing plenty of minimicrospheres. This multidose principle is designed to achieve good mixing with the chyme, emptying from the stomach together with the chyme and after release, good distribution of enzymes within the chyme. When the minimicrospheres reach the small intestine the coating rapidly disintegrates (at pH > 5.5) to release enzymes with lipolytic, amylolytic and proteolytic activity to ensure the digestion of fats, starches and proteins. The products of pancreatic digestion are then absorbed directly, or further hydrolysed by intestinal enzymes.

**Packaging and prices:** **Creon 10 000:** 100 capsules (container) 559219. **Creon 25 000:** 100 capsules (container) 147556.

**Creon 40 000:** 100 capsules (container) 180339.

**Reimbursement:** See A09A A02\_1 on the reimbursement list.

**Last changed:** 05.11.2018

**Based on SmPC approved by NoMA:** 06.02.2018

Mylan Healthcare Norge AS

Hagalokkveien 26, PB 194. 1371 Asker, [infor norge@mylan.com](mailto:infor norge@mylan.com)







# Treatment of exocrine pancreatic insufficiency with malabsorption in paediatric and adult patients<sup>1</sup>

Please see inside back page for Abbreviated Prescribing Information

**Reference:** 1. Creon SmPC approved By NoMA 06-02-2018.

Please contact us with your questions or comments:

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