



# STUDY SUMMARIES

## Actim<sup>®</sup> Pancreatitis

ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP) AND  
ACTIM PANCREATITIS

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# ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP) AND ACTIM PANCREATITIS

“Actim Pancreatitis is a useful tool in screening patients that may have developed post-ERCP acute pancreatitis.”

Endoscopic retrograde cholangiopancreatography (ERCP) is a procedure that enables physician to examine the pancreatic and bile ducts. One of the most serious complication of ERCP is acute pancreatitis (incidence varies from 1.3% to 24.4 %) Post-ERCP pancreatitis is not always symptomatic, but early diagnosis of acute pancreatitis is very important, because severe disease will develop in approximately 10% of patients. Traditionally, evaluation of amylase and lipase with clinical findings, are used to diagnose acute post-ERCP pancreatitis.

Trypsinogen-2 is secreted at high concentrations into pancreatic fluid, and because of the relatively small size, trypsinogen-2 is filtered through the glomeruli and the urinary concentration of trypsinogen-2 is high. Measurement of trypsinogen-2 is considered useful diagnosis of acute pancreatitis as the concentration rises fast and stays elevated for days.

Actim Pancreatitis is a bedside rapid test for screening acute pancreatitis. It is an immunological dipstick test to detect trypsinogen-2 in urine samples. The test is based on highly unique monoclonal antibodies.

The usefulness of Actim Pancreatitis for post-ERCP complication monitoring has been studied by Kemppainen et al. (1997) and Sankaralingam et al. (2007). Table 1 shows the results from the studies. Both studies show that Actim Pancreatitis is a useful tool in screening patients that may have developed post-ERCP acute pancreatitis.

**TABLE 1. Actim Pancreatitis in post-ERCP acute pancreatitis screening**

Reference		n	AP	Sens.	Spec.	PPV	NPV
Kemppainen et al. 1997, quantitative test	6 h post operation	106	11 (2)*	81 %	97 %	-	-
Sankaralingam et al. 2007, dipstick test	1 h post operation	29	5	100 %	91 %	66 %	100 %
	4 h post operation	29	5	100 %	96 %	80 %	100 %
* 2 severe acute pancreatitis cases were indentified correctly.							

## References

Kemppainen, E. A., Hedström, J. I., Puolakkainen, P. A., Sainio, V. S., Haapiainen, R. K., Perhoniemi, V., Stenman, U. H. (1997). Rapid measurement of urinary trypsinogen-2 as a screening test for acute pancreatitis. New England journal of medicine, 336(25), 1788-1793.

Sankaralingam, S., Wesen, C., Barawi, M., Galera, R., & Lloyd, L. (2007). Use of the urinary trypsinogen-2 dip stick test in early diagnosis of pancreatitis after endoscopic retrograde cholangiopancreatography. Surgical endoscopy, 21(8), 1312-1315.

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