

Smokers may have increased risk of pancreatitis

March 23 2009

Smoking appears to be associated with an increased risk of acute and chronic pancreatitis, according to a report in the March 23 issue of *Archives of Internal Medicine*. In addition, the risk of developing the disease may be higher in those who smoke more.

The occurrence of pancreatitis (an inflammation of the pancreas usually characterized by abdominal pain) has increased in recent decades, according to background information in the article. Acute and [chronic pancreatitis](#) are believed to be commonly caused by [gallstone disease](#) and excessive [alcohol](#) use, respectively. Studies have suggested that [smoking](#) may be associated with damage to the pancreas, but since smoking may be associated with alcohol use and risk of gallstone disease, it is difficult to note whether smoking is an independent risk factor for the disease.

Janne Schurmann Tolstrup, M.Sc., Ph.D., of the National Institute of Public Health, University of Southern Denmark, Copenhagen, and colleagues analyzed results from physical examinations and lifestyle habit self-administered questionnaires of 17,905 participants (9,573 women and 8,332 men) to determine if smoking was associated with an increased risk of acute or chronic pancreatitis independent of alcohol consumption and gallstone disease. Participants were followed up for an average of 20.2 years.

"Overall, 58 percent of the women and 68 percent of the men were current smokers, 15 percent of the women and 19 percent of the men were ex-smokers and 28 percent of the women and 13 percent of the

men had never smoked," the authors write. "Participants who at baseline reported smoking or being previous smokers had higher risks of developing acute and chronic pancreatitis compared with non-smokers." By the end of the study, 235 participants (113 women and 122 men) had developed acute (160 cases) or chronic (97 cases) pancreatitis, with some participants having developed both. About 46 percent of pancreatitis cases were attributable to smoking in this group.

Although alcohol intake was associated with increased risk of pancreatitis, the risk of pancreatitis associated with smoking was independent of alcohol and gallstone disease.

"Apart from the epidemiologic evidence of an association between smoking and development of acute and chronic pancreatitis, a biological effect of smoking seems plausible because both animal studies and human studies have demonstrated changes of the pancreas and in pancreatic functioning after exposure to tobacco smoke," they conclude.

More information: Arch Intern Med. 2009;169[6]:603-609.

Source: JAMA and Archives Journals ([news](#) : [web](#))

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