

FROM DEBILITATING PAIN TO AN ACTIVE LIFE: HOW WE MAKE A DIFFERENCE

Rare Procedure Releases Patient From Life of Pain

While most other young women were worried about prom and college applications, Elizabeth Todd was dealing with mysterious abdominal pain that left her debilitated and frustrated.

"My doctors thought it was just gastroenteritis," the now 33-year-old Todd recalls. She was treated with medication and, eventually, the pain went away.

It struck again four years later. This time, her doctors diagnosed her with pancreatitis and said her gallbladder was the source. They removed her gallbladder and, eventually, the pain went away.

The pattern continued every four to six years into her adult life: The pain would strike unexpectedly, leaving her crippled with pain and unable to eat solid food while her doctors continued to search for the source of her pain.

On March 12, 2007, the pain became so bad Todd ended up in the emergency department. For the next year, she was in and out of hospitals struggling with near constant pain.

"It got to the point where I was taking eight to 10 pain pills a day to combat the pain and I was still miserable," she recalls. "I had to put my entire life on hold because I never knew when the pain would strike again."

She learned through her father's friend about a Cincinnati team that performed a specialized procedure to "cure" chronic pancreatitis.

"I knew this was my only hope. I had lost 70 pounds because all my body could tolerate was tomato soup and Gatorade. I was in constant pain—I couldn't eat, function or work," says Todd. "For 14 years, I was misdiagnosed and mistakenly stigmatized

as someone just looking for drugs. Something major had to change."

She made an appointment to see Syed Ahmad, MD, co-director of the UC Pancreatic Disease Center, in January 2008. He diagnosed her with a genetic form of chronic pancreatitis. Because the damage was so severe, she would need a total pancreatectomy with islet cell transplantation.

The Cincinnati team is one of only three major centers in the United States that offer pancreatectomy (removal of the pancreas) with autologous islet

cell transplant to treat chronic pancreatitis (inflammation of the pancreas).

In this procedure, the patient's pancreas is completely removed. The organ is then taken to a laboratory where specialized enzymes are used to remove islet cells. The cells are then purified, processed and infused back into the patient through a vein in the liver.

"I finally have my life back," says Todd, who had surgery on April 18, 2008. "I went back to work full time in July. I can exercise again and live healthier than was ever possible before." •

ABOUT THE PANCREAS Located behind the lower part of the stomach, the pancreas is a small organ that produces insulin and enzymes that help the body process and use food. The pancreas creates clusters of cells called the islets of langerhans, which are made of several types of cells including insulin-producing beta cells. This hormone helps the body use glucose (sugar) for energy. If the body does not produce enough insulin or has trouble using it properly—causing glucose to build up in the blood—the patient will develop diabetes, requiring strict dietary changes or insulin injections.



Syed Ahmad, MD



For more information on the UC Pancreatic Disease Center, visit www.ucpancreas.org or call (513) 584-2873.

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Elizabeth Todd traveled from northern Ohio for specialized treatment at the UC Pancreatic Disease Center.