laparotomy for a perforated GDU especially if unwell and/or are unable to wait for transfer to a tertiary centre, or if there is a delay to theatre due to transfer to a tertiary hospital.

Author contributions

Vidyaa Seenarain: Data curation; formal analysis; investigation; methodology; project administration; writing-original draft; writing-review & editing. Tamalee Wilson: Writing-review & editing. David Fletcher: Supervision; writing-review & editing. Amanda Foster: Conceptualization; methodology; supervision; writing-review & editing.

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Supporting information

Additional Supporting Information may be found in the online version of this article at the publisher’s web-site:

Figure S1. The number of years of experience as a consultant general surgeon.

Alcohol-related acute pancreatitis: Lessons learnt during the COVID-19 lockdown in Victoria

In response to the COVID-19 pandemic, social distancing measures were introduced in Australia in mid-March 2020. While isolation at home has undoubtedly had an immediate and important role in controlling the pandemic, the health effects of long-term isolation are unclear. Specifically, the ways in which the stress, boredom and the isolation of physical distancing might affect drinking patterns are unknown. The Foundation for Alcohol Research and Education poll of >1000 Australians during the early lockdown period in April 2020 found that >20% of respondents reported buying more alcohol than usual since the outbreak, 70% were drinking more alcohol and 34% were drinking daily. Twenty-eight percent reported they were drinking alcohol to cope with anxiety and stress and 32% were concerned with the amount they were drinking.

Eighty-five percent of those who were drinking daily reported higher alcohol intake. In response to the COVID-19 pandemic, social distancing measures were introduced in Australia in mid-March 2020. While isolation at home has undoubtedly had an immediate and important role in controlling the pandemic, the health effects of long-term isolation are unclear. Specifically, the ways in which the stress, boredom and the isolation of physical distancing might affect drinking patterns are unknown. The Foundation for Alcohol Research and Education poll of >1000 Australians during the early lockdown period in April 2020 found that >20% of respondents reported buying more alcohol than usual since the outbreak, 70% were drinking more alcohol and 34% were drinking daily. Twenty-eight percent reported they were drinking alcohol to cope with anxiety and stress and 32% were concerned with the amount they were drinking.

Alcohol, together with gallstones, account for up to 80% of presentations with acute pancreatitis (AP) in Australia and can be associated with significant morbidity and mortality. With an initial observation of more severe AP presenting at our institution early during the lockdown period, a more systematic and comparative approach to understand this observation was undertaken.

Patients with a diagnosis of AP were identified by a hospital coding search over the lockdown period (March–July 2020) at Peninsula Health, Frankston. This was compared with the same time period in 2019. Severity was assessed using the Revised Atlanta Criteria for Acute Pancreatitis Severity and inferential statistics with Fisher’s exact test were used to establish association. The study was approved by the Peninsula Health Human Research and Ethics Committee.

After exclusion of non-AP patients and duplications, 118 and 112 cases of AP were identified for 2019 and 2020, respectively (Table 1). No patient had COVID-19 infection in the 2020 group. A higher proportion of severe pancreatitis was found for 2020, with only one of 118 (0.8%) case classified as severe in 2019 and seven of 112 (6.2%) cases in 2020 (p = 0.032). This is also reflected with more mild cases of AP in 2019 (109/118; 92%) compared to 2020 (91/112; 81%) (p = 0.02). The 2019 rate of severe AP was comparable to what has been published for our institution in the past, approximately 0.7%. Alcohol was more commonly attributed as the cause of AP in 2020 (34/112; 30%) compared to 2019 (20/118; 17%) (p = 0.046). Of those with severe AP in 2020, five of seven (71%) were caused by alcohol.
Compared to the same time period in 2019, there was a higher proportion of alcohol-related AP during the lockdown period at Peninsula Health in 2020, along with more severe cases. Conversely, however, there were more cases of idiopathic AP in 2019 (51/118; 43%) compared to 2020 (27/112; 24%) ($p = 0.003$). This shows the limitation of a retrospective study, and similarly a possible reporting and/or recall bias. Admitting doctors may have been more likely to enquire about and record alcohol consumption patterns in 2020, and patients may be more likely to truthfully report their drinking patterns during the lockdown. Furthermore, with only seven cases of severe AP, it is not the intention of this paper to directly attribute the higher rates of alcohol-related AP and severe AP to the lockdown alone. Nonetheless, this study does strengthen the public health messages related to the harms of alcohol and the need for support from alcohol liaison services. Furthermore, patients with AP may be presenting to hospital later with more established forms of the condition due to the general anxiety of being in and around healthcare services during the pandemic. This potential consequence of patient reluctance to attend emergency departments during the COVID-19 crisis supports the messaging around seeking medical care when unwell.

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### Data availability statement

The datasets generated during and/or analysed during the current study are available from the corresponding author on reasonable request.

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### Table 1  Baseline characteristics of patients with AP in 2019 and 2020

| Year | 2019 | 2020 | p-Value |
|------|------|------|---------|
| Number | 118 | 112 | |
| Gender | | | 0.89 |
| Male | 62 | 56 | |
| Female | 56 | 55 | |
| Transgender | 0 | 1 | |
| Severity | | | |
| Mild | 109 | 91 | 0.02 |
| Moderate | 8 | 14 | 0.18 |
| Severe | 1 | 7 | 0.032 |
| Aetiology | | | |
| Gallstones | 36 | 35 | 1 |
| Alcohol | 20 | 34 | 0.046 |
| ERCP | 4 | 5 | 0.74 |
| Other | 7 | 11 | 0.33 |
| Idiopathic | 51 | 27 | 0.003 |

AP, acute pancreatitis; ERCP, endoscopic retrograde cholangiopancreatography.