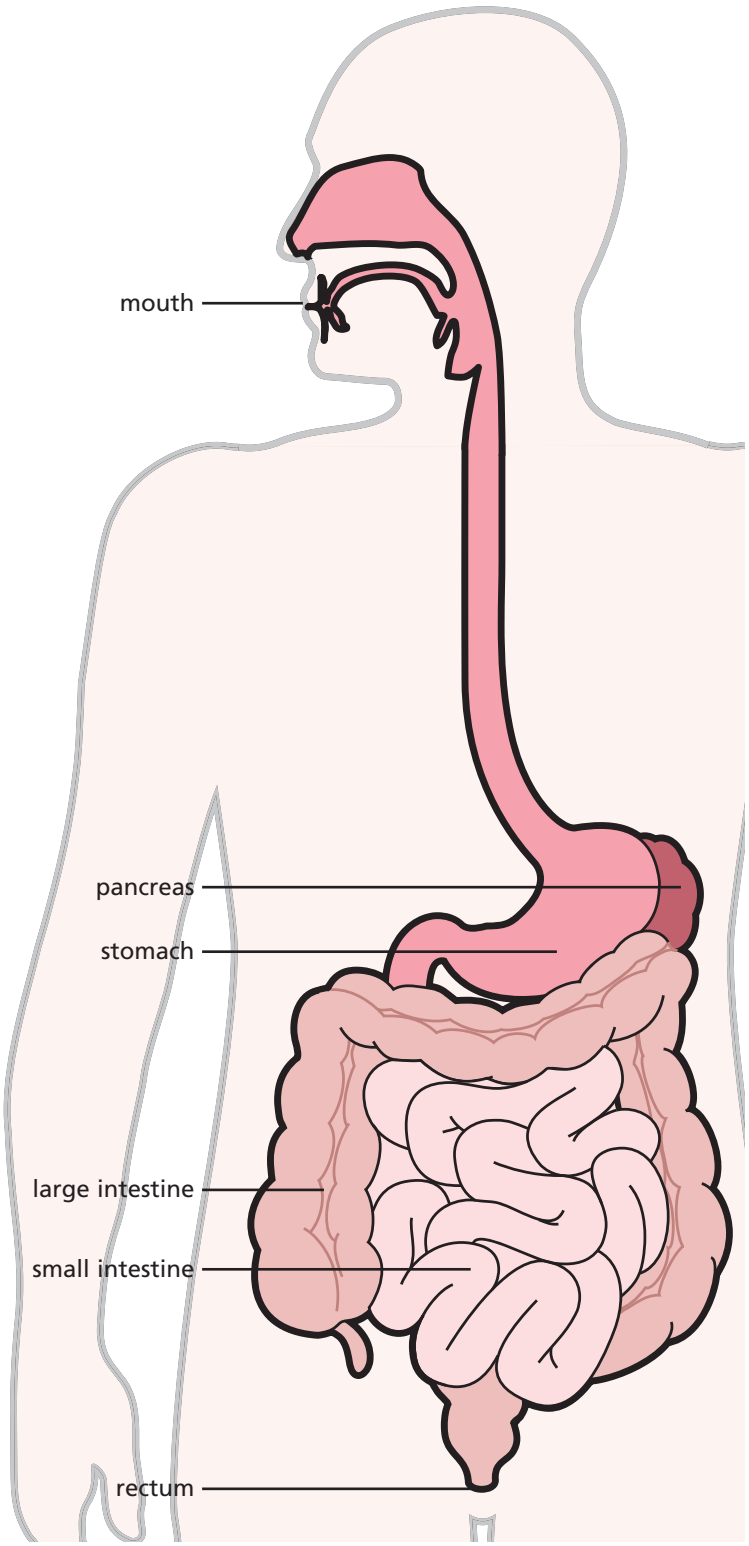
Great Ormond Street Hospital for Children NHS Foundation Trust: Information for Families

Pancreatic enzyme replacement in congenital hyperinsulinism



What are enzymes?

- Digestive enzymes are made in the pancreas. The fat, protein and carbohydrate in food is broken down by the enzymes to release nutrients.
- In congenital hyperinsulinism (CHI), if surgery has removed all or part of the pancreas, the food cannot be digested and absorbed by the body. This is called malabsorption and causes loose or oily stools, wind, stomach ache and poor weight gain.

How do enzymes work in CHI?

- There are several brands of enzymes which comes in a capsule for example Creon®. Beads inside the capsule contain digestive enzymes. The outer capsule dissolves in the stomach.
- The beads can be sprinkled onto food or in feeds or given with a small amount of puree in young children. They can be swallowed whole in older children.
- The beads then move along to the small intestine where the coating dissolves releasing the enzymes. Food is then broken down and the nutrients are absorbed by the body.
- Pancrex V® is a powder form of enzymes and can be mixed with water or milk and taken orally or through a nasogastric tube or gastrostomy feeding device.

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When should enzymes be taken?

- All food and drinks containing fat, including nutritional supplements, require enzymes.
- Enzymes need to be in the stomach at the same time as food.
- Enzymes should be taken at the start of a meal or snack. If you are unsure how much will be eaten or the meal has several courses, the dose can be split.
- If you forget to give enzymes at the start of a meal, it is not too late to take them at the end of a meal.

If you would like further information about using enzymes in CHI or have any questions, please contact the Clinical Nurse Specialists (CNS) for Congenital Hyperinsulism on 020 7405 9200 ext. 0360 or bleep 1016. You can also email them at cns.hypoglycaemia@gosh.nhs.uk

Compiled by the Congenital Hyperinsulinism team in collaboration with the Child and Family Information Group
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