

CP patients with dilated pancreatic duct
($\geq 5\text{mm}$) and moderate pain
REGISTRATION & FOLLOW-UP

Patient meeting the randomization criteria
(newly developed need for opioid analgesics)
RANDOMIZATION

Group A
Early surgical intervention

Enlarged pancreatic head ($\geq 4\text{cm}$)

Yes

Frey procedure

No

Pancreatico-
jejunostomy

Group B
Optimal Current Step-up Practice

Step 1. Optimal medical management

- Optimal pain medication (WHO pain ladder)
- Co-medication for neuropathic pain
- Dietary advice
- Management of pancreatic insufficiency

Failure of medical management

- Unsatisfactory pain control, or
- Clinically unacceptable side-effects

Step 2. Endoscopic intervention

- ERCP with sphincterotomy, and
- Dilatation of strictures (if necessary)
- Placement of pancreatic duct stent
- ESWL for large intraductal stones

Failure of endoscopic treatment

- Unsatisfactory pain control

Step 3. Surgical intervention
(as in group A)