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Pentasa enema in acute pancreatitis patients: A case report

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The amino salicylates have a direct local anti-inflammatory effect on the mucous membrane of the small intestine and colon. They have been used for many years in the treatment of inflammatory bowel disease (IBD), these are, generally, well tolerated, however, like all drugs; they may, in rare cases, cause side effects. We report a patient with a distal ulcerative colitis who presented with acute pancreatitis under Pentasa® enema.

Observation: This is a patient of 24 years old, without medical history, followed for a year due to a distal ulcerative colitis. Initially he was treated by oral corticosteroids (Cortancyl 60 mg); the steroid dose was tapered to 20 mg with recurrence of clinical manifestations (diarrhea 08 stools/day+rectal urgency), rectosigmoidoscopy indicates exacerbation of his illness. The decision was to put the patient on a dose of 60 mg Cortancyl associated with a local treatment with Pentasa enema to reduce the rectal syndrome. The patient presented 03 days after a violent epigastric pain radiating to the back associated with bilious vomiting, with laboratory showed a lipase 7x normal. The diagnosis of acute pancreatitis was retained with an abdominal CT scan after 48 hours that showed a normal sized homogeneous pancreas, (stage A of Balthazar), normal pancreas, acalculous gallbladder, and no intra or extra hepatic bile duct dilatation. The calcium and triglyceride were normal, IgG4 was also normal. The patient was strictly fasted for 48 hours and the Pentasa® enema suspended.

Evolution: The evolution was marked by the disappearance of pain and vomiting with normalization of lipase and enteral nutrition was retained without any difficulties. The diagnosis is pancreatitis in 5-ASA.

Conclusion: The acute pancreatitis secondary to amino salicylates is a very rare complication. In our case, taking the Pentasa® enema for 03 days was sufficient to cause acute inflammation of the pancreas.

Biography

Khalid Abdelwali completed his MBCh in 2005 from Faculty of Medicine, Assuit University and then worked in Assuit University Hospital for 1 year. After that, he started working in Manshyet Elbakry Hospital in Cairo, Egypt in the Department of Gastroenterology and Liver Diseases, and then a part time Physiology Lecturer in Misr International University. He finished his Diploma in Internal Medicine in 2014 at Ain Shams University, Egypt. He then moved to the Department of Gastroenterology and Liver Diseases in Sheikh Zayed Al Nahyan General and Specialized Hospital, Cairo. He is a resident in the Department of Gastroenterology and Liver Diseases, Ibn Sina University Hospital, Rabat, Morocco.

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