

Long-term continuing pancreatitis in
a subject with unresponsive Kawasaki disease
: A case report.

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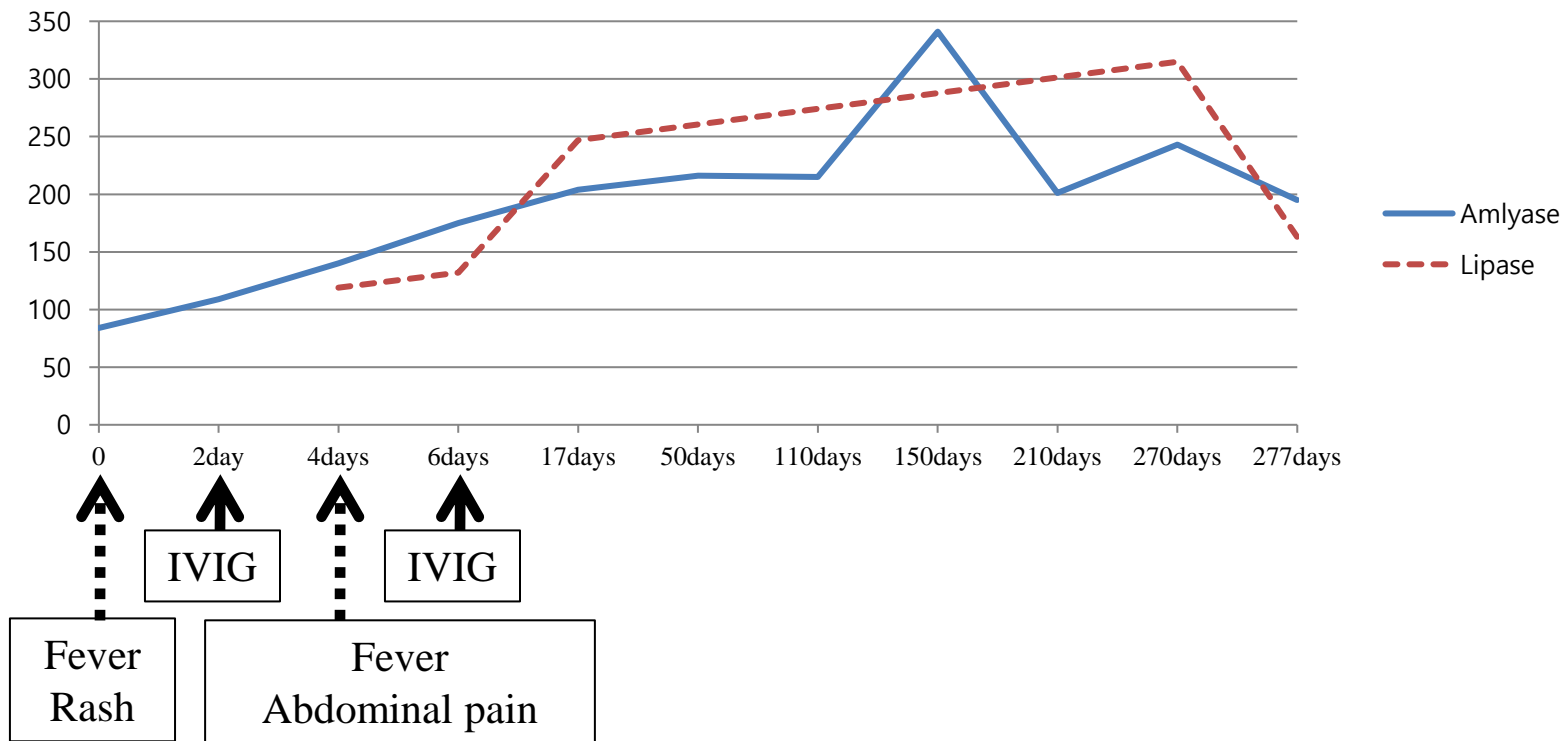
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Introduction

Some reports showed that pancreatic inflammation was developed with Kawasaki disease (KD), but clinical pancreatitis was rarely reported and its true incidence is unknown. In addition, there was no report about long term follow up and prognosis. We experienced a case diagnosed as pancreatitis with KD and persisted chronic pancreatitis condition.

Case

The child was referred to the Emergency Department with 2 days of continuous fever with skin rash and neck lymphadenopathy. He was diagnosed as KD and treated by intravenous immunoglobulin (IVIG). In hospitalization, he complained abdominal discomfort. Laboratory evaluation identified markedly increased levels of amylase and lipase. In addition, mild ascite was detected by abdominal ultrasonograph. Because of pancreatitis and continuous fever, he was treated with second IVIG. Complete resolution of fever and abdominal pain was achieved, but elevated amylase and lipase continued. He should be observed carefully to prevent aggravation of pancreatitis.



Conclusion

Pancreatitis is frequently associated with an incomplete response to IVIG treatment. Unresponsive first IGIV therapy is common in patients with KD-associated pancreatitis. Gastrointestinal symptoms in KD should consider pancreatic involvement. The pathogenesis of pancreatitis in KD has not yet been completely identified. Widespread inflammation may involve pancreas, although pancreatic inflammation often remains subclinical. Microscopic examination would be helpful to confirm the immune-mediated vasculitis in pancreas affecting medium-sized artery, differently to the other forms of pancreatitis. Long term follow up study should be needed because pancreatitis with KD was rare and developed at young age.