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Acute pancreatitis after short and long-term use of 5-amino-salicylic acid

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rug-induced pancreatitis (DIP) is a rare medical condition that needs a high index of suspicion to be diagnosed. DIP is not accompanied by clinical or laboratory evidence of a drug reaction, such as rash, lymphadenopathy, and/or eosinophilia. Drug rechallenge is the best available evidence for diagnosis of DIP. Idiopathic pancreatitis or microlithiasis may induce recurrent attacks of acute pancreatitis increasing the challenge for diagnosis of DIP. Here, we present two cases of ulcerative colitis on 5-aminosalicylic acid (5-ASA) and developed DIP, one case developed acute pancreatitis 6 days and the other case developed acute pancreatitis 9 months after initiating the treatment with 5-ASA. DIP occurs with mesalamine suppositories in the first case while the second case ras secondary to oral mesalamine. Diagnosis was done by exclusion of other common causes, high amylase and lipase, dual-contrast abdominal CT and rechallenge test. Resolution of symptoms occurred 3 days and one week respectively after stopping mesalamine. We concluded that although DIP is a rare entity, it should be considered in patients taking mesalamine for both short and long periods.

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