

懷孕時期高血脂急性胰臟炎：病例討論

Gestational hyperlipidemic pancreatitis: a case report

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摘要

懷孕時合併高血脂急性胰臟炎會導致非常可怕的發症，本病例報告一懷婦女因急性腹痛合併嘔吐，午夜入院求治。病人血清三甘油脂為 2040mg/dl、血清解脂酵素為 6059U/L、澱粉酵素為 1455 U/L，診斷為懷孕高血脂急性胰臟炎。懷孕高血脂急性胰臟炎在懷孕婦女是非常罕見的併發症，常常導致母親及胎兒致病甚至死亡。大部份急性胰臟炎臨床上症狀在三到七天間內，經過治療後都能痊癒。急診醫師要知道懷孕高血脂急性胰臟炎對母親及胎兒有潛在性嚴重的併發症，對所有懷孕高血脂急性胰臟炎的人都要嚴密的監視系統。

Abstract

Gestational hyperlipidemic pancreatitis is an uncommon complication of pregnancy with high risks of both maternal and fetal morbidity and mortality. In 85 to 90 percent with acute pancreatitis, the disease is self-limited and subsides spontaneously, usually within three to seven days after treatment is established. We report on a 32 year old woman with extreme gestational hyperlipidemia and severe pancreatitis. She visited our emergency department with complaints of severe epigastric pain, nausea and vomiting. The laboratory evaluation was remarkable for serum lipase 6059 U/L. Acute pancreatitis was diagnosed. Therapy was supportive adequate hydration and fasting. Ten hours later, she was admitted to the intensive care unit due to shock. The fetal heart rate had dropped 100 beats/min. An emergency cesarean section was performed under epidural anesthesia, but the fetus died. The mother was finally complicated with sepsis, acute renal failure and adult respiratory distress syndrome. Emergency physicians should know the potentially serious complication of gestational hyperlipidemic pancreatitis. Intensive monitoring of all gestational hyperlipidemic.