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THERAPEUTIC PLASMA EXCHANGE (TPE) IN A CASE OF HYPERTRIGLYCERIDEMIC PANCREATITIS

Hypertriglyceridemia (HTG) is the third most common cause of acute pancreatitis, accounting for 4-10% of cases. It is a complex disorder with an underlying mechanism that is influenced by genetic, metabolic, environmental, and patient –specific factors. HTG can be familial, or secondary due to diabetes mellitus, nephritic syndrome, hypothyroidism, pregnancy, inactivity, high-carbohydrate diets, excess alcohol intake, and different drugs.

HTG requires early detection to reduce development of organ failure and limit sequelae. TPE is a Category III indication (American Society for Apheresis (ASFA) guidelines) for hypertriglyceridemic pancreatitis and prevention of its relapse. TPE can significantly reduce triglyceride levels and reduce inflammatory cytokines.

We had successfully performed TPE in a case of hypertriglyceridemic pancreatitis, and could significantly reduce the triglyceride levels in the patient from 3953 mg/dl to 291 mg/dl with one procedure.

