



Pantoprazole induced Anaphylactic Shock: A Case Report

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ABSTRACT:

Pantoprazole is the most commonly used proton pump inhibitor for gastric acid suppression. It is most prescribed for its remarkable safety and few adverse effects. Many side effects had been reported but it has rarely reported as a cause of anaphylaxis. We report a case of 45yr old male patient who encountered adverse reaction from mild rash, itching to severe reaction of anaphylaxis on two different occasions. This case report explains the importance of proper patient education, their awareness regarding adverse drug reactions to drugs, their role in informing the treating doctors regarding the same, and the need for careful history taking by doctors regarding drug allergies and cautious use of even the most commonly used drugs and those with low incidence of adverse effects.

KEY WORDS: Anaphylaxis; Pantoprazole; Proton-pump Inhibitor; Adverse Drug Reaction

INTRODUCTION

Pantoprazole is one of the medication belonging to the class of proton pump inhibitors. This is used for treating erosive gastritis, esophagitis, gastric ulcer, duodenal ulcer and Zollinger Ellison syndrome.[1] PPIs act on proton pump or H⁺/K⁺ ATPase selectively, which is the last stage of the process needed for gastric acid secretion.[2] These are the most prescribed drugs in the world and are remarkably safe, with very few adverse effects, this has led to their over prescription and large scale OTC sales.[3,4] Many side effects had been reported following pantoprazole use but it has rarely reported as a cause of anaphylaxis. Hence, we report a case of a patient who experienced Oral Pantoprazole induced Anaphylactic reaction.

CASE REPORT

A 45yr old male patient was presented to the casualty with complains of giddiness, itching, rashes since morning. On examination vitals; PR was 64bpm, BP and SpO₂ were not recordable, RR was 15cpm. And no signs of PICCLE, and the patient's Systemic examination was normal.

On enquiry, the patient said that he took Oral Pantoprazole of 40 mg due to the gastritis and also said that he had history of similar episode 6 months back and explained about his allergic reaction towards Tab. Doxycycline and Inj. Diclofenac on previous admission in the same hospital. And also explained that the reaction occurred after one hour intake of Tab. Pantoprazole 40mg.

The patient was treated with Inj. Hydrocortisone 100mg stat IV, Inj. Pheniramine 2mg stat IM, Inj. Adrenaline 0.5ml, IV fluids 3pint NS at 60 drops per min, Tab. Cetirizine 10 mg and was kept under observation. Gradually his symptoms subsided and patient improved in some time. And he was diagnosed with Hypothyroidism.

INVESTIGATIONS

Routine tests like complete blood count, Renal function tests, Liver function tests, Serum electrolytes, Thyroid function tests, ECG were done.

The Thyroid function tests showed elevated TSH levels stating that patient is having Hypothyroidism. So, he was treated with Tab. Thyroxine.

In order to treat Gastritis, we looked for an alternative option. So, we did oral challenge test with Ranitidine 150mg. The patient tolerated well. Hence, the patient was discharged with Tab. Cetirizine, Tab. Thyronorm and Tab. Ranitidine.

DISCUSSION

Pantoprazole is the drug which belongs to the class of Proton pump inhibitors.[1] Side effects like headache, dizziness, joint pain, nausea, vomiting, abdominal pain, increased risk of stomach and pancreatic cancer, acute interstitial nephritis, diarrhea, risk of fractures, vitamin B12 deficiency, hypomagnesemia, fever, hypertensive pneumonitis, liver damage, severe acute hepatitis, Kounis syndrome and thrombocytopenia have been reported

following usage of PPTs.[5-14] As per the literature, few cases of anaphylaxis to Pantoprazole have been reported[15] and our case is another report of anaphylaxis to pantoprazole. Anaphylactic reaction to Pantoprazole is reported both with IV and Oral routes of administration.[16]

Pramendra Prasad Gupta et al. reported case series of two cases of anaphylaxis reactions to Oral Pantoprazole in a 38 year and 32 year old female patients.[15]

Telaku S et al. reported case series of two cases of anaphylactic reactions to infusion of pantoprazole and oral pantoprazole.[16]

Gholamreza Faridaalace et al. reported a case of anaphylaxis reaction to IV Pantoprazole for gastritis.[1]

Antonio Palha Ribeiro et al. reported a case of anaphylaxis reaction to IV Pantoprazole during Peribulbar Anesthesia.[18]

CONCLUSION

Anaphylactic reaction due to PPIs is rare but, it is life threatening. And awareness about this incidence to the doctors is as necessary as like awareness of Penicillin induced anaphylactic reactions. And spreading knowledge about this to the public should also be the responsibility of the doctors and pharmacists for better patient care.

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