

中文題目：以嘔吐及急性胰臟炎為表現之副甲狀腺亢進

英文題目：Hyperparathyroidism masquerading as hyperemesis and acute pancreatitis in pregnancy

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Background: Nausea and vomiting are common in the early period of pregnancy and rarely seen as an overture to pancreatitis.

Patients and Methods: We describe a 31-year-old pregnant woman who presented with progressive nausea and vomiting followed by severe epigastric pain.

Biochemical data and sonographic features confirmed the occurrence of acute pancreatitis. Accompanying electrolyte abnormalities included hypercalcemia and hypokalemia. Her condition stabilized following medical treatment, but hypercalcemia persisted despite intravenous fluids and furosemide administration.

Results: A diagnosis of primary hyperparathyroidism was made based on the elevated parathyroid hormone level and urinary calcium-to-creatinine clearance ratio.

Localization study with neck ultrasonography indicated left inferior parathyroid adenoma. She underwent parathyroidectomy successfully and made an uneventful recovery.

Conclusion: Although primary hyperparathyroidism during pregnancy is usually asymptomatic, patients may present with atypical manifestations such as hyperemesis and pancreatitis. Proper diagnosis and timely intervention are crucial to minimizing potential hazards to both mother and fetus.