

## Acute Cholestatic Hepatitis Due to EBV Infection-Case Report

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### Abstract

**Background:** Epstein-Barr virus (EBV) is part of the herpes virus family and infects up to 90% of the population. EBV is one of the viruses that persist for life in human organism. During infectious mononucleosis caused by EBV infection, jaundice is distinctly uncommon and may reflect either more severe hepatitis such as cholestatic hepatitis.

**Case presentation:** A 23-year-old girl with clinical signs of infectious mononucleosis, presented with hyperbilirubinaemia, elevated hepatocellular enzyme levels AST 410U/L, ALT 585U/L, ALP 825U/L, thrombocytopenia; lymphocytosis 67.6% and monocytosis 15.4%. She had history of dental treatment. Serology for Epstein-Barr virus Viral Capsid Antigen

Immunoglobuline M (EBV VCA IgM), was positive. The serological examination for hepatitis A-E as well HIV, CMV and Toxoplasma gondii resulted negative. The patient left the hospital after 19 days in good clinical conditions.

**Conclusions:** Epstein-Barr virus is associated with a wide variety of clinical manifestations and can present as cholestatic hepatitis with or without features of infectious mononucleosis. Cholestasis is associated with EBV infection, and should be part of the differential diagnosis.

**Keywords:** Epstein-Barr virus, infectious mononucleosis, cholestatic hepatitis, liver enzyme.

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