Benign Recurrent Intrahepatic Cholestasis Triggered By Gram-Negative Rod Sepsis

Edmond Puca^{1*}, Entela Puca^{2,3}, Sindi Celiku⁴, Dea Puca⁵

Service of Infection Diseases, University Hospital Center "Mother Teresa", Tirana, Albania
Service of Endocrinology, American Hospital, Tirana, Albania
Western Balkan University, Tirana, Albania
Service of Intern Medicine, American Hospital, Tirana, Albania
University Our lady of Good Counsel

Abstract

it experience episodes of cholestasis, during which the liver cells have a reduced possibility to release bile. Episodes of cholestasis can last from weeks to months. Between these episodes, patients are asymptomatic. Bacterial infections are one of the factors that can trigger the disease. Case: A 68-year-old patient presents to our Emergency Department with urosepsis due to Escherichia Coli, based on clinical and laboratory findings. The patient reported that he had frequent episodes of jaundice. The patient was diagnosed with benign recurrent intrahepatic cholestasis syndrome and sepsis by Escherichia Coli. This paper aims to draw the clinicians'

Background: Benign recurrent intrahepatic

cholestasis is a rare condition. People living with

attention about this syndrome which is very rare in clinical practice and especially in Albania.

Conclusion: An early diagnosis of BRIC will prevent over-investigation of the patient during subsequent attacks and allows the patient and his family to be given the reassurance and advice that they require. Clinical physicians should always suspect BRIC in patients with high levels of bilirubin and normal laboratory values and radiology findings.

Keywords: benign recurrent intrahepatic cholestasis, BRIC, sepsis, Escherichia Coli