

**Abstract:**

**Background:** Drug induced liver injury (DILI) is a spectrum of clinical diseases from mild liver function derangement to acute liver failure. It is commonly caused by idiosyncratic reactions. Most of the drugs are associated with hepatic injury. Pregabalin is usually well tolerated and there are very few case reports of pregabalin induced liver damaged have been documented worldwide. We present a case of pregabalin induced liver injury. This is probably the first reported case in sri Lanka.

**Case presentation:** Mrs.W.M.S. Siriwardena a 51-year-old lady with background history of osteo arthritis of right knee and chronic pain syndrome presented with yellowish discoloration of eyes, vomiting, epigastric pain and loss of appetite for three days durations without fever. She was on pregabalin 75 mg bd which was started from the pain clinic 45 days before. On examination she was icteric and there was right hypochondrial tenderness. There were no peripheral stigmata of liver cell diseases. She was found to have elevated liver enzymes. The highest value of aspartate transaminase was 2232 U/L, alanine transaminase 2045U/L, and  $\gamma$ -glutamyltransferase 186 U/L. Other causes for elevated liver enzymes were excluded and liver biopsy suggestive of drug induced liver damage. Hepatic enzyme levels improved only after starting of steroids and returned gradually (over 6 months) to baseline levels.

**Conclusion:** Pregabalin should be consider as a rare cause of acute liver injury. It is very important to monitor liver function if a patient who is on pregabalin presented with constitutional symptoms.

Key Words: pregabalin, acute liver injury, idiosyncratic reactions