

Abstract.

Carbimazole is a well established antithyroid drug that is widely used in thyrotoxicosis. It has a wide spectrum of adverse effect profile. But Carbimazole induced cholestatic hepatitis is a very rare adverse effect and it usually settles with the cessation of the drug in most of the cases. It is an extremely rare incident in the clinical world and medical literature to have Carbimazole induced cholestatic hepatitis that simply does not respond to drug cessation, instead worsening the patient's condition needing liver dialysis or liver transplantation to salvage the patient.

Here we present a case of a young lady recently diagnosed with hyperthyroidism who developed cholestatic hepatitis within one month of initiation of Carbimazole that did not respond solely to cessation of drug alone, but needed plasma exchange to alleviate her distressing symptoms and improve biochemical liver profile.

This case highlights the effectiveness of plasma exchange in refractory cases of drug induced cholestasis as a therapeutic option.
