

Abstract

Pancreatico pericardial pleural fistula is an extremely rare complication of chronic pancreatitis. We report a case of 38 year old alcoholic male who presented with high grade fever, chest pain, nonproductive cough and exertional dyspnea.

Physical examination revealed cardiac tamponade features and left side pleural effusion. Transthoracic echocardiography showed massive pericardial effusion and chest X ray showed enlarged globular heart with left side pleural effusion.

Serum amylase and pericardial fluid amylase were very high. Acute on chronic pancreatitis with pancreatico pericardial pleural fistula was confirmed by contrast CT thorax and abdomen. Patient was successfully managed with repeated pericardiocentesis, intravenous broad spectrum antibiotics and subcutaneous Octreotide 50 microgram twice daily without endoscopic or surgical intervention.