

A drug after my own heart: perimyocarditis after mesalamine use

Introduction

- Mesalamine a commonly used first line treatment to induce remission in mild to moderate Ulcerative Colitis.
- Mesalamine can rarely cause serious and life threatening cardiac and lung inflammation including myocarditis, pericarditis, pleural or pericardial effusion.

Case

- 33-year-old male recently diagnosed with moderate pancolonic ulcerative colitis on mesalamine presented with one day of pleuritic, positional chest pain and exertional dyspnea.
- Labs were remarkable for elevated troponin to 0.918, elevated brain naturetic peptide at 2770 and elevated Ddimer to 0.94.
- Electrocardiogram showed diffuse PR depression and ST elevations consistent with pericarditis.



Colleen Boyle, MD, LT, MC, USN; Sarah Schulte, MD, LT, MC USN; Brett Sadowski, MD, LT, MC, USN Naval Medical Center Portsmouth, VA



- A transthoracic echocardiogram revealed moderate global hypokinesis with a reduced ejection fraction of 25-30%.
- Mesalamine was stopped. He was started on started Ibuprofen 600mg and colchicine 1mg.



- **Cardiac MRI showed hyperenhancement throughout basal**to-mid inferior and inferolateral wall with ~5% scar burden proving the diagnosis of perimyocarditis.
- He was pain free after 2 days. Follow up 1 month later his ejection fraction had recovered to 52%.
- He was deemed fit for full duty 3 months later after passing treadmill exercise stress testing.

Case cont

- weeks.
- symptoms.

1. Taha ME, Abdalla A, Al-Khafaji J, Malik S. Mesalamine-Induced Myopericarditis: A Case Report and Literature Review. Cardiol Res. 2019;10(1):59-62. doi:10.14740/cr820 2. Merceron O, Bailly C, Khalil A, et al. Mesalamine-induced myocarditis. Cardiol Res Pract. 2010;2010:930190. Published 2010 Sep 13. doi:10.4061/2010/930190 3. Rothfuss KS, Stange EF, Herrlinger KR. Extraintestinal manifestations and complications in inflammatory bowel diseases. World Journal of Gastroenterology 2006;4819-31.

Disclaimer: The views expressed in this poster reflect the results of research conducted by the author and do not necessarily reflect the official policy or position of the Department of the Navy, Department of Defense, or the United States Government. I am a military service member. This work was prepared as part of my official duties. Title 17 U.S.C. 105 provides that "Copyright protection under this title is not available for any work of the United States Government." Title 17 U.S.C. 101 defines a United States Government work as a work prepared by a military service member or employee of the United States Government as part of that person's official duties.



Discussion

• Mesalamine induced myocarditis is a rare but potentially lethal complication with a reported incidence up to 0.3%.

 Typically occurs within 1-2 weeks of starting the medication but has been reported as early as 48 hours and as late as 4

• Withdrawal of mesalamine leads to symptomatic improvement and recovery of ejection fraction within weeks.

 Future treatment with mesalamine and other 5-ASA derivatives must be avoided as it can trigger recurrent

• Our case highlights a rare and life-threatening complication of a commonly used medication and the importance of discussing the potential risks of medications with patients.

Patient's UC symptoms have returned since stopping therapy and he remains hesitant to start other agents over concerns regarding career and adverse effects.