



# TRIGLYCERIDE-INDUCED PANCREATITIS

A painful and potentially life-threatening inflammation of the pancreas caused by very high triglyceride levels.

## OVERVIEW



When triglyceride levels are extremely high (usually  $\geq 1,000$  mg/dL), chylomicrons can overwhelm the pancreas, leading to inflammation. This is a common cause of acute pancreatitis and can become recurrent or chronic.

## KEY FACTS

- ✓ Accounts for ~1–4% of all acute pancreatitis cases
- ✓ Risk increases significantly when TG  $\geq 1,000$  mg/dL
- ✓ Can be the first sign of an underlying lipid disorder
- ✓ Recurrence is common without proper management
- ✓ Can lead to chronic pancreatitis and long-term complications

## RISK FACTORS THAT RAISE TRIGLYCERIDES



**Genetic lipid disorders**  
FCS, MCS, and other genetic conditions



**Obesity & metabolic syndrome**  
Especially with insulin resistance



**Type 2 diabetes**  
Poorly controlled blood sugar raises triglycerides



**Alcohol**  
A leading trigger for severe TG elevation and pancreatitis



**High carbohydrate / high fat diet**  
Can cause large rises in TG



**Medications**  
Steroids, estrogens, retinoids, thiazides, beta blockers, and others

## SYMPTOMS OF AN EPISODE



- Severe abdominal pain (usually upper abdomen, may radiate to the back)
- Nausea and vomiting
- Fever
- Rapid heart rate
- Abdominal tenderness
- Bloating

## DURING A PANCREATITIS EPISODE



Hospitalization may be required



IV fluids and pain control



No eating (NPO) until pain improves



Triglyceride-lowering treatment (medications  $\pm$  insulin, heparin, or plasmapheresis in severe cases)



Treat underlying cause and contributing factors

## LONG-TERM RISKS



Recurrent pancreatitis



Chronic pancreatitis



Exocrine pancreatic insufficiency



Diabetes



Nutritional deficiencies



Fatty liver disease



Increased risk of cardiovascular disease

## PREVENTION & LONG-TERM MANAGEMENT



Keep triglycerides  $< 500$  mg/dL (ideally  $< 150$  mg/dL)



**Follow a low-fat, heart-healthy diet**  
Focus on whole foods, lean proteins, healthy fats, high-fiber foods



**Avoid alcohol completely**  
Even small amounts can trigger severe elevations



**Take prescribed medications as directed**  
Fibrates, omega-3s, statins, niacin, and other therapies



**Work with a lipid specialist or your healthcare team**  
Regular follow-up is key



**Control contributing conditions**  
Diabetes, thyroid disease, kidney disease, etc.



### GET EMERGENCY CARE IMMEDIATELY IF YOU HAVE:

- Severe abdominal pain that does not improve
- Persistent vomiting
- Rapid heart rate
- Inability to keep down fluids



Early treatment saves lives and can prevent complications.



Lowering triglycerides is the best way to prevent another episode and protect your pancreas.