Eosinophilic cholangiopathy

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A 73-year-old man with a history of excision of thymoma presented with abdominal discomfort and abnormal liver enzyme test results [aspartate transaminase (AST) level, 92 IU/L; alanine transaminase (ALT) level, 123 IU/L; gamma-glutamyl transferase (GGT) level, 256 IU/L; and alkaline phosphatase (ALP) level, 1427 IU/L]. His eosinophil count was 1,360/mm$^3$ (normal range, 40-500/mm$^3$). The patient received antibiotic therapy with cefoperazone for 18 days before developing eosinophilia. The results of the test for parasites were negative. Endoscopic ultrasound (EUS) revealed thickening of the walls of the common bile duct (CBD) (about 0.30 cm) and gall bladder (GB) (about 0.76 cm). EUS also revealed swollen ampulla and dilatation of the pancreatic duct and CBD. We took biopsy specimens from the edematous and hyperemic major ampulla. Microscopic examination revealed infiltration of eosinophils into the tissue. On the basis of these findings, we suspected the diagnosis of eosinophilic cholangiopathy. The patient’s condition improved without any immunosuppressive treatment. EUS performed after 1 month revealed decrease in the thickening of the walls of the CBD and GB. Blood test revealed normalization of the eosinophil count (eosinophil count, 280/mm$^3$).