

Acute Pancreatitis as an Extrapulmonary Manifestation and Pulmonary Embolism as a Complication of COVID-19: A Case Report

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Abstract

Introduction: Coronavirus disease 2019 (COVID-19), caused by SARS-CoV-2, first emerged in Wuhan, China, in late 2019. Besides respiratory involvement, COVID-19 may cause coagulation abnormalities, leading to thromboembolic events. Mild forms of acute pancreatitis have also been reported in patients

with COVID-19 pneumonia. The aim of this case report is to highlight rare extrapulmonary manifestations of SARS-CoV-2 infection, with emphasis on pancreatic involvement.

Case Report: A male patient was admitted with sore throat, dry cough, and fever up to 38.0°C. He had received the first dose of the Sinopharm COVID-19 vaccine three weeks prior and was obese (BMI 44.7 kg/m²). On admission, he developed pulmonary thromboembolism. Color Doppler ultrasonography of the lower extremities showed no signs of superficial or deep vein thrombosis. On the eleventh day of treatment, laboratory tests revealed elevated serum amylase, lipase, and leukocyte count. Abdominal ultrasonography demonstrated a hyperechoic, non-enlarged pancreas, consistent with mild acute pancreatitis. Given the widespread presence of endothelial cells, SARS-CoV-2 infection may affect multiple extrapulmonary organs, including the CNS, cardiovascular system, kidneys, pancreas, liver, and gastrointestinal tract.

Conclusion: SARS-CoV-2 infection may lead not only to pneumonia but also to thromboembolic complications and mild acute pancreatitis. Awareness of such rare extrapulmonary manifestations is important for timely diagnosis and management.

Keywords: COVID-19, pneumonia, pulmonary embolism, acute pancreatitis, vaccination