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## Toxic-Metabolic Risk Factors Are Uncommon In Pediatric Chronic Pancreatitis

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Acute Pancreatitis; Acute Recurrent Pancreatitis; Hypertriglyceridemia; Children; Genetics

### To the Editor

We appreciated the comments by Oracz, *et al* (1) regarding their experience in childhood chronic pancreatitis (CP) and specifically toxic-metabolic risk factors. We previously reported toxic-metabolic factors only in 11% of children with CP in our INSPPIRE (INTERNATIONAL Study Group of Pediatric Pancreatitis: In Search For a CuRE) cohort, similar to the frequency reported by Oracz, *et al* (14%) (2). Genetic risk factors were most common in our study, similar to other pediatric studies (3-6). Medications, alcohol, smoking, chronic renal failure, hypercalcemia were uncommon in both cohorts (0-4%) (1, 2), but lipid disorders was much higher in the Polish cohort (7.2%) compared to ours (1% with hypertriglyceridemia). Because hypertriglyceridemia is associated with acute pancreatitis, acute recurrent pancreatitis and possibly CP (7, 8), we recommend defining the lipid disturbances and specifically serum triglyceride levels in their cohort. Multiple risk factors may be found in children with CP (2), therefore it would be of interest whether Polish children with CP and lipid disturbances had other risk factors including genetic mutations, obstructive/anatomical problems or other toxic-metabolic risk factors.

The study by Oracz, *et al*, along with our work emphasizes that toxic-metabolic risk factors are relatively uncommon in childhood CP. In children, genetic risk factors predominate (2); in adults toxic-metabolic risk factors (mostly alcohol) (9) are most common. Studies on carefully phenotyped and longitudinally followed cohorts such as INSPPIRE have the potential to shed light into the risk factors and pathogenesis of pediatric pancreatitis with improved diagnostics and therapeutics.

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