

Acute pancreatitis induced by ~~hypocalcemia~~ hypercalcemia due to primary hyperparathyroidism (PHPT) is a very rare ~~condition, with the~~ and its prevalence is ~~estimated to be between~~ estimated to be between 1.5% ~~and~~ and 7%. Previous ~~S~~ studies ~~conducted from in~~ India report ~~an the~~ incidence of PHPT ~~between to be between~~ 6.8% and 12%. However, ~~in~~ patients with PHPT and resulting hypercalcemia, ~~experience~~ pancreatitis ~~occurs 10 to 20-fold times~~ more often ~~often than than in~~ the general population. ~~The metabolic causes of acute pancreatitis include diabetic ketoacidosis, hypertriglyceridemia, and hypercalcemia with or without hyperparathyroidism. Normally, h~~ypocalcemia is ~~expected generally occurs~~ during an attack of acute pancreatitis; ~~thus, and~~ hypercalcemia is a strong ~~elue~~ predictor for ~~suspecting~~ PHPT. Hence, ~~findings of~~ elevated serum calcium levels associated with pancreatitis should ~~alert the physician to either be~~ indicative of hyperparathyroidism or malignancy. ~~The metabolic causes of acute pancreatitis include diabetic ketoacidosis, hypertriglyceridemia, and hypercalcemia with or without hyperparathyroidism.~~ ~~The most common etiologies of pancreatitis are g~~ Gallstones and alcoholism, ~~are the commonest etiological agents of pancreatitis.~~ Serum calcium level is not routinely measured in all patients diagnosed with ~~the a~~ first attack of acute pancreatitis as it is not ~~the a~~ common ~~cause etiology~~. Some patients suffer from ~~2 two~~ or more ~~attaek attacks~~ of pancreatitis before ~~the being diagnosed with diagnosis of~~ PHPT. ~~Here W~~we describe ~~the case of~~ a 30-year-old female ~~patient~~ who presented to a gastroenterology unit with severe upper abdominal pain, vomiting, and ~~a 3-day history of fever of 3 days' duration.~~ She had ~~experienced a similar episode of similar~~ symptoms 2 months previously, for which she was admitted to a ~~civil~~ hospital ~~and diagnosed, where she was diagnosed as with case of~~ acute pancreatitis. ~~There, she was and was~~ managed conservatively and discharged after 7 days. ~~She had no~~ ~~No additional risk factors causing acute pancreatitis such as~~ history of alcohol

**Comment [A1]:** Terms such as *thus*, *therefore*, *furthermore*, and *however* are used as transition words to help in a better flow of ideas. Here, *thus* helps connect the two sentences and helps a reader understand that the former sentence helps understand why hypercalcemia is a strong predictor for PHPT.

**Comment [A2]:** The text has been re-arranged so that the reasons why elevated serum calcium levels can indicate the presence of hyperparathyroidism or malignancy can be more clearly understood.

**Comment [A3]:** Ensuring accurate singular or plural form usage is essential for grammatical accuracy. Here, as more than one attack is being referred to, the plural form (attacks) is used.

**Comment [A4]:** Removing redundancy aids in better readability and comprehension. Here, "a similar episode of symptoms" has been revised to "similar symptoms" to present the same idea in a more concise manner.

consumption, ~~or hyperlipidemia, and gallstones were present;~~ ~~however,~~ ~~She had a history of~~ ~~undergone~~ cholecystectomy 1.5 years earlier for ~~gallstones~~. After proper evaluation, ~~a~~ ~~she~~ ~~was diagnosed with~~ ~~diagnosis of~~ post-cholecystectomy acute pancreatitis ~~was made, a~~ ~~and the~~ ~~patient~~ was managed conservatively. ~~However, she was readmitted~~ ~~W~~within the next 5 months, ~~she was again admitted with~~ ~~after experiencing~~ dyspeptic symptoms and ~~abdominal~~ ~~pain~~ ~~pain in abdomen over~~ ~~of~~ 20 days' ~~duration~~. On ~~physical~~ examination, the abdomen was ~~found to be~~ soft with diffuse tenderness, ~~especially~~ ~~particularly~~ in the right hypochondrium.