

中文題目：放線菌膿胸-病例報告

英文題目：Pleural empyema caused by actinomyces- A case report

作者：陳家閔¹、郭子右¹、吳寬澧¹、蔡怡萱¹、李政萱¹、黃吉志^{1,2}、黃明賢^{1,3}

服務單位：高雄醫學大學附設中和紀念醫院 ¹內科部胸腔內科
高雄醫學大學醫學院 ²呼吸治療學系 ³醫學系內科

Case Presentation

This 81-year-old man with a history of chronic obstructive pulmonary disease suffered from intermittent chest pain and low-grade fever for 1 month. During hospitalization for the treatment of probable pneumonia, diabetes mellitus and hepatocellular carcinoma were diagnosed. After discharge, the chest pain recurred, accompanying with fever, productive cough and progressive dyspnea, which brought him back to the emergency department. The lab examination showed leukocytosis and elevated C-reactive protein level. The chest radiograph revealed opacity with air fluid level in the left lung field. Chest ultrasonography confirmed the presence of effusion and thoracentesis revealed greenish pus. Thoracostomy with pigtail draining catheter was done with about 200 ml of pus drained immediately. He was treated with levofloxacin 750 mg daily to cover nosocomial pathogens. However, cytological examination of the effusion revealed many bacterial clumps with sulfur granules. The antibiotic was therefore changed to penicillin G under the impression of actinomycosis. After a week of drainage and antibiotic treatment his fever subsided and the follow-up chest radiograph revealed resolution of the opacity. The antibiotic was then changed to oral amoxicillin/clavulanate for further 7 days. He had an uneventful recovery without recurrence of the empyema.

Discussion

Actinomycosis is an infectious disease caused by *Actinomyces* species. The common infection sites include cervicofascial, thoracic and abdominopelvic region. The diagnosis of actinomycosis is difficult and depends on culture or histology. Due to slow growth, the culture media should be kept for at least 14 days. The histological or pathological examination usually revealed sulfur granules. Actinomycosis presenting as isolated pleural effusion or even empyema is uncommon and is easily overlooked. Therefore, we presented a case of pleural empyema caused by actinomyces to alert the physician about this possibility.