中文題目:主動脈瓣心內膜炎併發脾臟及腎臟敗血性栓塞壞死 英文題目: Septic Embolism in Spleen and Kidney in Endocarditis

作 者:楊宗翰,陳昇遠,劉開璽,吳寶榮

服務單位: 國軍高雄總醫院左營分院內科部心臟內科

Figure Legend

A 49-year-old male patient who is heroin addict presented with symptoms of fever and abdominal pain for 5 days. The physical examination showed soft abdomen, but severe with rebound tenderness over the left upper quadrant region. The laboratory examination showed leukocytosis (14610/ul) with left shift and elevated C-reactive protein level (12.8mg/dl) that matched sepsis. To suspecting acute abdomen, computed tomography of abdomen was performed and surprisingly, large splenic (4.9x3 cm², panel A and C) and concurrent right renal (1.7x1.3 cm², panel B and C) infarction detected. By the blood culture reporting growth of streptococcus group G that normally exists in the skin and also the history of heroin abuse, septic embolization was highly suspected. The following transthoracic echocardiography confirmed the vegetation growth (1.3x1.2 cm², panel D) over the aortic valve that resulted in severe aortic regurgitation. After adequate antibiotic therapy, the patient was referred to surgical repair for aortic valve.

