中文題目:成人呼吸窘迫症候群併發單純皰疹病毒和巨細胞病毒的伺機性感染-病例報告

英文題目: Adult Respiratory Distress Syndrome (ARDS) Patients combind Opportunistic Infections with Herpes simplex virus (HSV) and cytomegalovirus (CMV) - A case report

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Introduction:

Immunologic "immaturity" is often blamed for the increased susceptibility of cancer patients to infection, but the precise mechanisms and details of immunologic development remain somewhat obscure. Herpes simplex virus (HSV) and cytomegalovirus (CMV) are two of the more common severe infectious agents of the periods.

Case Report:

This 71 years old man had type 2 diabetes, hypertension, hepatitis B (receiving Telbivudine prophylaxis) and lung cancer (adenocarcinoma), pT2bN0, s/p VATS lobectomy with neck LAP recurrence s/p mass excision, and s/p chemotherapy thereafter. He started to have productive cough and fever developed later. He visited hemato-oncology clinic. Chest computed tomography scan was arranged and showed progressive change of neck and mediastinal LAPs, suspected left adrenal metastasis or active pneumonia in bilateral lower peripheral lungs. The last chemotherapy (Docetaxel) was given on 08-10. He was transferred to intensive care unit due to progressive respiratory distress with desaturation. CXR showed rapid progress to diffuse lung infiltrates. High flow nasal cannula, strong antibiotics, anti-Pneumocystis jirovecii, steroid and anti- cytomegalovirus and herpes simplex virus meds were given. His condition continued to deteriorate. Results for studies on potential pathogens could not explain his acute lung problem. After BiPAP failed, he received intubation and heavy sedation for adult respiratory distress syndrome management. Septic shock with oliguric renal failure developed. Vasopressor was used, antibiotics were adjusted to cover new growth of pathogens, and continuous veno-venous hemofiltration was started. Despite the treatment, no improvement was found. After discussion with his family, they requested for comfort care only. He eventually passed away on September. Discussion:

Opportunistic infections viral infections diagnosed after hospital admission may play a significant yet unrecognized role in the ICU patients. While they are the most common organism of infection in immunocompomenzied adults, they should been considered to be a serious risk factor for those critically ill patients who are admitted to the ICU.