中文題目:中年糖尿病女性的胸部 X 光片發現右上腹不尋常氣體

英文題目: Emphysematous liver abscess in a middle-aged diabetic female

作者:陳冠伯1,歐子銘1,2

服務單位:國軍高雄總醫院1內科部2腸胃肝膽科

## Abstract

**Rationale:** Emphysematous liver abscess was first introduced by Smith in 1944. Emphysematous liver abscesses account for 7–24% of pyogenic liver abscesses, whose annual incidence in Taiwan increased steadily from 10.08/100,000 population in 2000 to 15.45/100,000 in 2011. The risk factors of the disease include diabetes, malignancy, renal disease, and pneumonia.

**Patient concerns:** A 58 year-old household female with past history of type 2 diabetes mellitus, transferred from a local clinic, presented with high fever and generalized soreness for 4 days. Vomiting and malaise were observed. She reported no recent trauma, headache, neck stiffness, sore throat, cough or shortness of breath, diarrhea, dysuria, diaphoresis, weight loss, arthralgias, morning stiffness, or fresh rashes.

**Diagnoses:** On arrival, chest radiograph revealed two enlarged gas formation over the right upper abdomen. Furthermore, computed tomography disclosed emphysematous liver abscesses.

*Interventions:* We administered antibiotic treatment with ceftriaxone 2gm/24h and metronidazole 500mg/8h parenterally. Asystole developed within hours after admission.

**Outcomes:** The patient passed away very quickly. Thereafter, blood cultures yielded Klebsiella pneumonia, susceptible to ceftriaxone.

**Lessons:** Emphysematous liver abscess could be noticed by a simple abdominal plain film, as in our case, before we performed further image survey, like abdominal ultrasound, computed tomography or magnetic resonance imaging. Our case enlightened the importance of image investigation on the suspicion of pyogenic liver abscesses, followed by prompt drainage under antibiotic therapy and glycemic control.