

# A 46-year-old Cirrhotic Man Presented with High Fever, Chills, Confusion, and Right Leg Swelling and Tenderness for 1 Day

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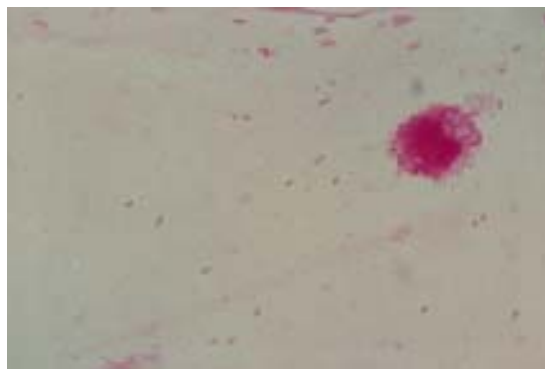
## Disseminated *Vibrio vulnificus* infection

The morphology of the organism shown was suggestive for *Vibrio* or *Aeromonas* spp. (curved Gram-negative bacilli). Blood, joint and pleural fluids cultures of this patient eventually grew *Vibrio vulnificus*. The organism is primarily associated with severe, distinctive soft tissue infection and/or septicemia, especially in patients with cirrhosis<sup>1-3</sup>, because of its ability to invade the blood stream without causing gastrointestinal symptoms.<sup>1</sup> More than 90 percent of septicemic patients have a history of having consumed raw oysters in the 7 days prior to illness. Early administration of antibiotics and surgical debridement (if indicated) are crucial for bacteremic and disseminated *V. vulnificus* infections, especially in immunocompromised patients even though the response rate is usually low. Tetracycline is the first-choice

agent, with cefotaxime or ciprofloxacin as alternatives.<sup>1</sup> The mortality may be high up to 33 percent despite early antibiotic therapy and surgical debridement.<sup>2,3</sup>

## References

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2. Tsai YH, Hsu RW, Huang KC, et al. Systemic vibrio infection presenting as necrotizing fasciitis and sepsis. A series of thirteen cases. *J Bone Joint Surg Am* 2004;86-A:2497-502.
3. Chuang YC, Yuan CY, Liu CY, Lan CK, Huang AH. *Vibrio vulnificus* infection in Taiwan: report of 28 cases and review of clinical manifestations and treatment. *Clin Infect Dis* 1992;15:271-6.



**Figure.**

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