中文題目:以ceftriaxone合併 levofloxacin成功治療沙門氏菌血症伴隨急性呼吸窘迫症候群: 一病例報告

英文題目:Successful Treatment with Ceftriaxone and Levofloxacin for Salmonella Septicemia

Accompanied by Acute Respiratory Distress Syndrome: A Case Report 作者:陳志金1 蘇美玉1 余文良1,2 楊俊杰1 服務單位:1奇美醫學中心加護醫學部;2台北醫學大學內科學系

Background :

Acute respiratory distress syndrome (ARDS) is rare in salmonellosis. We presented an alcoholic cirrhosis patient developed Salmonella septicemia with ARDS.

Case Report :

This 51-year-old man has underlying diseases of old cerebrovascular accident, bilateral decortication of pleura, with tracheostomy. He had a head injury in a motorcycle accident. He was brought to emergency department on 102-11-21. Brain CT showed left frontoparietal subdural hemorrhage (SDH) without midline shift. Then he was admitted to intensive care unit. Sudden onset of dyspnea and respiratory failure happened. Emergent endotracheal tube insertion with mechanical ventilator was done on 102-11-24. CXR showed ground-glass opacities in bilateral lung fields. C-reactive protein (CRP) was 191.31mg/L (normal, <3) with blood gas analysis revealed pH, 7.432; PCO2, 29.8 mmHg; PO2, 78.4 mmHg; HCO3, 20 mmol/L; base excess, -2.8 mmol/L; FiO2, 50 %; P/F ratio, 156.8 mmHg, indicating moderate ARDS. Fever with blood and stool culture showed Salmonella group B. Ceftriaxone with levofloxacin was used on 102-11-25. CXR still showed extensive ill-defined air-space consolidation in both lungs on 102-12-29. But CRP decrease to 29.03 mg/L. Antibiotics was kept on use. CXR showed much improvement on 102-12-4. As his general condition improved, he was transferred to our ward on 102-12-6. Follow-up blood culture showed no growth, so levofloxacin was DC. CTA-aorta showed no evidence of mycotic aneurysm. CXR showed almost complete resolution of bilateral lung infiltrates on 102-12-13. Ceftriaxone was kept on use. Clinical condition was stable. He was discharged on 102-12-21.

Conclusion:

Rapid progression of septic shock, hypoxia, bilateral lung infiltrates and Salmonella septicemia led to the suspicion of pneumonia accompanied by ARDS. Although Salmonella-associated ARDS or pneumonia is rare, we emphasize combination therapy with ceftriaxone and levofloxacin for patients with rapidly worsening respiratory symptoms caused by Salmonella septicemia or with pneumonia.