

中文題目：登革熱重症類似缺血性腸炎病例分享

英文題目：Dengue Hemorrhagic Fever Presenting as Ischemic colitis: A Case Report

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Case Presentation

This 79-year-old woman with a medical history of ischemic heart disease, hypertension visited the Emergency Department for bloody diarrhea, progressive right abdominal pain, and fever for 2 days. An urgent abdominal computed tomography (CT) revealed intestinal wall thickening involving the transverse colon, ascending colon and cecum, with mild mesenteric fat stranding. Intestinal ischemia was suspected. Laboratory data revealed leukopenia (3300/uL), normal platelet count, and mild elevated C-reactive protein (103.26 mg/L). After admission, she rapidly developed shock, oliguria, disseminated intravascular coagulation (DIC), metabolic acidosis and multiple organ failure. Despite aggressive treatments, she died 28 hours after admission to the medical ICU. Because she was from a dengue endemic area, we reported the suspicion of dengue fever to Taiwan Centers for Disease Control (CDC). Later the diagnosis of dengue virus infection was confirmed.

Discussion

Southern Taiwan has been a dengue endemic area for decades. A series of gas explosions on July 31, 2014 was considered leading to the outbreak of dengue fever in the following months. A total of 15,732 cases of dengue fever was reported in Taiwan on 2014. Acute abdomen is not a common presentation of dengue hemorrhagic fever/dengue shock syndrome (DHF/DSS). A previous study reported 14 cases of DHF/DSS presenting as acute abdomen including 10 acute cholecystitis (6 acalculus and 4 calculus cholecystitis), three non-specific diffuse peritonitis, and one acute appendicitis. Through the literature review, however, we found that ischemic colitis has never been reported as initial presentation of DHF/DSS. Although the diagnosis of ischemic colitis was not confirmed by angiography, abdominal CT scan showed typical features. In our patient, the underlying cardiovascular disease, DIC, and capillary leak-associated hypoperfusion might be the causes of ischemic colitis. However. The mechanism of dengue-induced ischemic colitis remains to be elucidated.

In conclusion, severe dengue virus infection may present as ischemic colitis although it is rare. Dengue fever should be among the differential diagnoses in patients with acute abdomen, particularly when they are from a dengue endemic area and have leukopenia. Aggressive hydration and other supportive cares remain the keys to increase the chance of survival in such patients.