

中文題目：嗜麥芽寡食單胞菌菌血症引起之急性呼吸衰竭：一病例報告

英文題目：Acute Respiratory Failure Caused by *Stenotrophomonas maltophilia* Bacteremia: A Case Report

作者：蘇美玉<sup>1</sup> 余文良<sup>1,2</sup> 陳志金<sup>1</sup>

服務單位：<sup>1</sup>奇美醫學中心加護醫學部；<sup>2</sup>台北醫學大學內科學系

### **Background:**

*Stenotrophomonas maltophilia* is a multidrug-resistant gram-negative bacillus that is an opportunistic pathogen, particularly among hospitalized patients. *Stenotrophomonas maltophilia* infections have been associated with high morbidity and mortality in severely immunocompromised and debilitated individuals. We report acute respiratory failure caused by *stenotrophomonas maltophilia* bacteremia in a patient.

### **Case Report:**

A 76-year-old male of coronary artery disease, hypertension and hyperlipidemia suffered from dyspnea for days. He was brought to emergency department on December 7, 2015. Laboratory data revealed WBC, 31,600 / $\mu$ L; platelet count, 12,500 / $\mu$ L; c-reactive protein, 83.3 mg/L; lactate, 7.1 mmol/L; creatinine, 5.86 mg/dL; K, 5.1 mmol/L. Arterial blood gas showed pH, 7.265; PCO<sub>2</sub>, 54.1 mmHg; PO<sub>2</sub>, 53.5 mmHg; HCO<sub>3</sub>, 24.8 mmol/L; Base excess, -2.1 mmol. Hydration was given for acute kidney injury. CXR showed suspected pneumonia, edema in both lungs. However, progressive dyspnea persisted. Emergency intubation was performed. Then he was admitted to intensive care unit. Empiric antibiotics treatment with imipenem and levofloxacin were given. Fluid resuscitation and vasopressor agent were given for hypotension. Blood culture yielded *stenotrophomonas maltophilia*. Sputum culture yielded *pseudomonas aeruginosa* and carbapenem-resistant *acinetobacter baumannii*. Shifted antibiotics to sulbactam sodium and kept imipenem and levofloxacin were used. Upper gastrointestinal bleeding was also noted. Panendoscopy showed reflux esophagitis, LA grade A. Blood transfusion with PLT-PH and cryoprecipitate were given to correct coagulopathy. Metabolic acidosis and oliguria was also noted. CVVH treatment was performed. CXR showed both lung consolidation lesions and patchy infiltration with bilateral CP angles blunting are noted, in favor of pneumonia change. However, his condition remained worsening despite aggressive treatment. Family members requested palliative therapy and the patient expired on December 17, 2015.

### **Conclusion:**

*Stenotrophomonas maltophilia* is the third most frequent non-fermentative Gram-negative bacilli in nosocomial infections, and usually causes severe infections such as primary bacteremia and pneumonia. Current antimicrobial treatment recommendation for *stenotrophomonas maltophilia*

infections are based on case series, case reports and in vitro susceptibility tests, and levofloxacin and trimethoprim-sulfamethoxazole are the most commonly used agents to treat these infections.