

中文題目：一位新冠肺炎感染者合併鉤端螺旋體病

英文題目：Co-infected with *Leptospirosis* in a COVID-19 confirmed case

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**Introduction:**

A 77 year-old male was admitted due to abdominal pain, malaise, oliguria for 2 days. He had the past history of chronic HCV carrier, asthma, peptic ulcer, adjustment disorder and L-HIVD (3-5) s/p. At ER, physical examination showed conscious clear, no fever, no headache, no pallor face, no chest pain, no CP angle knocking pain, but only lower abdominal pain without rebounding pain. Laboratory data showed COVID-19 PCR test positive reaction, mild leukocytosis (11,080/uL), uremic status (BUN 94.3mg/dL, Cr 6mg/dL, GFR 6.7mL/min). On the impression of COVID-19 infection and AKI (acute kidney injury), he was arranged to negative pressure isolation room. After anti-viral agent (Molnupiravir), antibiotics (ertacure/doxycycline) and emergent hemodialysis (thrice), he was recovered progressively. Finally, the paired serum which was sent to CDC proved the diagnosis of *Leptospirosis*.