

Complicated community-acquired methicillin-resistant *Staphylococcus aureus* pancarditis with cardiac pseudoaneurysm in a healthy child: A case report



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Abstract

Introduction: Infective endocarditis is more prevalent among children with congenital heart diseases as compared to healthy children. Community-acquired methicillin-resistant *Staphylococcus aureus* is a causative pathogen of infective endocarditis, and it rarely causes pancarditis in healthy children. The clinical decision for surgical intervention of left-sided heart vegetation is challenging despite the availability of management guidelines.

Presentation of case: We report a case of a previously healthy 12-year-old girl who presented with aggressive endocarditis secondary to community-acquired methicillin-resistant *Staphylococcus aureus* infection, with left-sided vegetation, mitral valve regurgitation, pancarditis, brain abscess, and stroke. She underwent an emergency vegetectomy and mitral valve repair. Three weeks after the first surgery, she developed left ventricular pseudoaneurysm that required life-saving surgical intervention. The child gradually recovered and was discharged home with acceptable cardiac function and mild neurological deficit.

Discussion: Pancarditis, especially with an aggressive progression resulting in intracardiac pseudoaneurysm, is rarely reported in healthy children. The definition of the optimal timing of surgical intervention in pediatric infective endocarditis management is lacking and the clinical decision-making process remains challenging. The development of left ventricular pseudoaneurysm is serious and also needs an immediate intervention, given the high risk of its rupture and subsequent devastating outcomes.

Conclusion: Community-acquired methicillin-resistant *Staphylococcus aureus* is an etiology for aggressive infective pancarditis in a healthy child, leading to an intracardiac pseudoaneurysm. Emergency surgical interventions should be considered in children with left-sided vegetation to prevent devastating consequences.

Biography

Nada Ali Aljassim, Currently working as a Consultant of Pediatric intensive Care and Pediatric Cardiac Intensive Care at King Fahad Medical City in Riyadh, Saudi Arabia. Pediatric ECMO leader since January 2020. She had completed the Saudi board of Pediatric intensive care on 2016 and attained McGill university Pediatric intensive care fellowship in Montreal, Canada on 2018. An associate member in World Interactive Network Focused on Critical UltraSound "WINFOCUS".



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