



Septic arthritis secondary to PVL toxin producing staphylococcus aureus

Arpit Patel, Sachi Shah

Royal Free Hospital, London, United Kingdom

Abstract:

Panton-Valentine Leukocidin (PVL) toxin producing strains of staphylococcus aureus are known to cause severe skin and soft tissue infections. We present a case report of a patient who suffered from septic arthritis and overwhelming sepsis from proven PVL toxin secreting staphylococcus aureus. Case Study: A 13 year old boy presented to the Emergency Department with a one day history of right sided hip pain and an inability to weight bear, one week after incision and drainage of a left sided buttock abscess. He was systemically unwell with raised inflammatory markers and continued to deteriorate despite Co-Amoxiclav and washout of the hip. Post-operatively, ongoing pain led to an MRI that showed worsening right hip septic arthritis with extensive inflammatory changes. A change of antibiotics to Rifampicin and Trimethoprim following PVL isolation and second washout led to improvement. Discussion: The literature supports that beta-lactam antibiotics increase the expression of staphylococcus aureus PVL toxin by activating its transcription leading to a greater systemic inflammatory response. Patients usually present with minor skin infections however rarely, invasive infections can occur including septic arthritis. An MDT effort to achieve early surgical management with tailored antibiotics can improve outcome as the use of penicillin can be detrimental.

Biography:

Mr Arpit Bakulash Patel MBCHB, BSC(Hons), MRCS (England), PGCert (Medical Education)

Core Surgical Trainee, London Deanery



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