

Introducing Septic Arthritis in a New Light

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EDITORIAL NOTE

Septic arthritis is a joint infection that causes joint inflammation in children who are otherwise healthy. Fever, weakness, and headache are all possible symptoms. If left untreated, septic arthritis in children can have significant implications. Antibiotics such as vancomycin, ceftriaxone, or ceftazidime are used as a first line of drugs. It commonly affects the hips, knees, and shoulders in children. Early indications and symptoms in children might be vague, and they can be mistaken for childhood limb damage. A youngster with septic arthritis has a painful limb that worsens over time until it can no longer bear the weight. This is frequently linked with tenderness in the affected area. Swelling and redness in the affected area are well-known symptoms. Because there are frequently little or no objective indications to depend on, clinical assessment of neonates and children with septic arthritis is extremely problematic. Pain, swelling, and warmth at the affected joint are the most common symptoms of septic arthritis in adults. Fever is sometimes a sign, but it is less common in older persons. The knee is the most commonly afflicted joint in adults. Less typically affected joints are the hip, shoulder, wrist, and elbow. The spine, sternoclavicular, and sacroiliac joints are all possible sources of pain. Intravenous drug usage is the most common cause of arthritis in these joints. Only one joint is usually affected. If a bacterium is carried through the bloodstream, it might affect more than one joint. Septic arthritis is most usually caused by a bacterial infection that spreads via the bloodstream from an infection in the bone or tissue around the joint. The risk factor of septic arthritis increases with age and other health complications generated with the adulterary age like age above 60,

diabetics mellitus, other immunosuppressive medication and other causes of sepsis, osteoarthritis and any other surgeries.

Treatment is usually with intravenous antibiotics, analgesia and washout or aspiration of the joint. Draining the pus from the joint is important and can be done either by needle or opening the joint surgically. The surgical procedure includes: Joint aspiration: joint synovial fluid aspiration techniques where a needle aspiration is done to extract the fluid from the infected site and the fluid is drain and subjected for organism culture where gram negative organisms are determined from the drained fluid, depending on the gram negative or gram positive bacteria the further tests are done for the final diagnosis, the culture results are dependent on the intake of antibiotic before the surgical procedure. The other laboratory tests are done like blood testing white blood cell count, red blood cell count, and C - reactive protein tests are conducted for further. The inflamed areas are determined through some of the imaging like X-rays, Ultrasound, CT and MRI. The ultrasound, CT, MRI are the main imaging diagnostics tests which can appropriately determine the inflamed sight and the area of infection, the early diagnosis can be done using this diagnostics procedures. The treatment may include use of analgesic, antibiotic or surgical procedure of aspiration. Priorly the pus from the site is drained using the needle as aspiration. The antibiotics are generally administered through intravenous route only. The most commonly used antibiotic ceftazidime. In children the treatment for the septic arthritis include the usage of corticosteroids which may reduce the pain caused these are generally the low quality evidence.

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