

## **ANKLE SEPTIC ARTHRITIS IN AN UP-TO-DATE IMMUNIZED INFANT**

Danial Faris Hilmi<sup>1</sup>, Richford Anak Jonathan<sup>1</sup>, Chan Zhi Yung<sup>1</sup>

<sup>1</sup>Selayang Hospital

**Introduction:** Septic arthritis of the ankle joint is of very low incidence especially in infants. They are often difficult to recognize and treat where a delay in treatment will cause permanent articular surface damage caused by the release of proteolytic enzymes from the inflammatory, synovial and bacterial cells. Hence, a prompt recognition and treatment from caretakers and health care workers are essential to prevent complications such as osteomyelitis and joint stiffness. We report a case study where a 2 months boy presented with painful non resolving right ankle swelling following 2 days history of significant trauma. Case report. The patient was started on antibiotics and underwent open arthrotomy washout with findings of 5cc pus with osteomyelitis of the talus. The intraoperative culture yielded Staph aureus which is sensitive to our antibiotics. A splint for the ankle joint gives additional soft tissue care and ease the mother to nurse her infant who is responding well to treatment. The patient was planned to complete a total course of 6 weeks antibiotics will be monitored for clinically and by laboratory investigations. In the absence of satisfactory clinical or laboratory improvement within 72 to 96 h from debridement, repeat irrigation and debridement may be considered. Prognosis depends on young age, delay in treatment, organism and site.

**Discussion:** EARLY SURGICAL INTERVENTION IN VITAL

**Conclusion:** DEBRIDEMENT WITH STERILE CULTURES HAS PROVEN TO BE EFFECTIVE IN ADDRESSING THE CAUSATIVE ORGANISM/ INFECTION.