Disseminated Melioidosis Presenting As Multifocal Septic Arthritis

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INTRODUCTION:

Melioidosis is an infectious disease caused by gram negative bacterium called *Burkholderia pseudomallei* which is commonly a soil borne pathogen. It usually causes abscess in the lungs, liver, spleen, skeletal muscle, especially in patients who are immunocompromised. Septic arthritis is rare but well-recognized manifestation of this disease.

CASE REPORT:

This is an 8 year-old healthy girl, presented with the chief complain of unable to ambulate due to bilateral knee and ankle pain. It is associated with 2 weeks history of fluctuating fever and also non-specific gastrointestinal symptoms such as loose stool, vomiting and abdominal pain. Further history revealed that she had river swimming prior to these illnesses.

Physical examination showed multiple joints swelling including bilateral knee and ankle. Joints appeared erythematous, warm and tender upon palpation with marked reduced range of movement.

Laboratory investigations showed an elevated infective markers (CRP-272, ESR-113, WBC-12). No significant finding on joints radiograph. Ultrasound examination noticed minimal effusions in all joints.

We proceeded with percutaneous joint aspiration under emergency list, in which cloudy joint fluid was aspirated from her right knee and left ankle. Hence, arthrotomy washout were done.

After surgery and adequate intravenous antibiotic, she was able to walk with walking frame and pain improved over bilateral lower limbs.

Sample	Culture
Left hip	No growth
Left knee	No growth
Left ankle	Burkholderia
	pseudomallei
Right hip	No growth
Right knee	Burkholderia
	pseudomallei
Right ankle	No growth

Table 1 - Culture results of joint aspiration.

DISCUSSION:

The mode of transmission of melioidosis in this case is thought to be percutaneous inoculation with contaminated soil and water. Multiple septic arthritis, which were the principle presentation of our patient, is a rare manifestation of melioidosis.

CONCLUSION:

Septic arthritis is one of the few orthopedic emergencies. Early diagnosis is important to avoid sequelae such as cartilage destruction, osteomyelitis, ankylosis, growth aberration and joint instability. Due to the high mortality of this disease, the early commencement of treatment for melioidosis without waiting for definitive investigations should be considered.

REFERENCES:

1. Clin.Microbiol Rev.2005,18:383-416.