Article 3



Images in clinical medicine



Necrotizing pneumonia in intensive care unit



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Necrotizing pneumonia in intensive care unit

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Image in medicine

An 81-year-old woman with a history of type 2 diabetes and hypertension presented with dyspnea, progressing rapidly with hypoxemic respiratory failure, requiring invasive mechanical ventilation. The initial study, in addition to high inflammatory markers, identified Streptococcus pneumoniae antigen in the urine. The patient was started on antibiotics and admitted to the Intensive Blood culture also Unit. Streptococcus pneumoniae and chest CT-scan showed consolidation of the right lung parenchyma with cavitated areas, suggesting necrotizing pneumonia. Given the diagnosis of necrotizing pneumonia, antibiotic therapy was prolonged, with progressive clinical and imaging improvement. We

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find this image relevant because no physician should forget the complications of frequent diseases such as community-acquired pneumonia. Necrotizing pneumonia is a rare but exuberant complication and despite its association with Stapylococcus aureus, Streptococcus pneumoniae is not an unusual causing pathogen. This complication requires prolonged antibiotherapy and clinical and imaging surveillance.

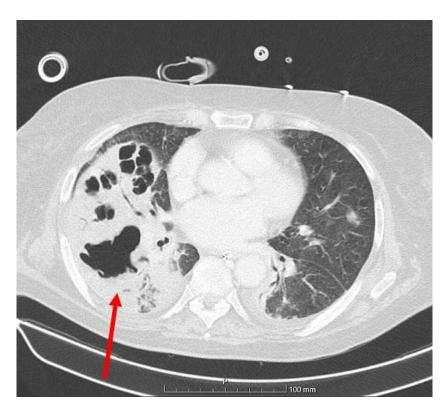


Figure 1: necrotizing pneumonia