

## Facial Purpura Fulminans with *Klebsiella pneumoniae* Sepsis

Saraswati Kushwah<sup>1</sup> and Anurag Sachan<sup>2\*</sup>

<sup>1</sup>Junior Resident, Department of General Medicine, Government Medical College and Hospital, Chandigarh, India

<sup>2</sup>Senior resident, Department of General Medicine, Government Medical College and Hospital, Chandigarh, India

\*Corresponding author: Sachan A, Senior resident, Department of General Medicine, Government Medical College and Hospital, Chandigarh, India, Tel: +212 655396895; E-mail: [anuragsachan223@gmail.com](mailto:anuragsachan223@gmail.com)

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### 1. Clinical Description

A 35-year-old male was referred from a peripheral hospital with history of fever and worsening shortness of breath to our emergency. On admission his general condition was very poor with hypoxemia and altered sensorium. He had developed reddish brown hemorrhagic lesions over his face and extremities. He was intubated and relevant investigations were sent. Chest X-Ray showed opacities in bilateral lung fields (Right>Left).

He was started on intravenous meropenem, vancomycin and noradrenaline as inotropic support in view of septic shock. His skin lesions darkened and worsened over the hospital stay. Coagulation profile was suggestive of disseminated intravascular coagulation. Blood cultures and sputum culture grew *Klebsiella pneumoniae* sensitive to Tigecycline and Colistin. His condition worsened and he succumbed to his illness within 40 hours of admission due to refractory septic shock. The figure attached shows purpura fulminans on his face in a butterfly pattern[1A], right hand[1B] and left hand[1C].

### 2. Image Legend

A 35-year-old male presented with fever and shortness of breath to the emergency. He had a butterfly pattern hemorrhagic facial rash [FIG. 1] with multiple purpuric lesions over his hands and feet. His coagulation profile was suggestive of disseminated intravascular coagulation. Blood culture grew *K. pneumoniae* and the patient succumbed within 40 hours of admission.

Purpura Fulminans is an uncommon and life-threatening dermal condition characterized by cutaneous haemorrhages and necrosis. The main organisms associated with infectious purpura fulminans are *Neisseria meningitidis*, *Streptococcus pneumoniae* and *Haemophilus influenzae* and rarely with *K. Pneumoniae*. It has a very poor prognosis.



FIG. 1

### 3. Author Contributions

Both authors were involved in the care of the patient in the emergency and drafting of the manuscript.

### 4. Consent

Informed consent obtained from the patient's brother for publishing images and relevant clinical data.

### 5. Conflict of Interest

None