

ESSAY - 14



1) 60 year old farmer presented with fever for last 5 days, associated with myalgia.

O/E: Pulse Rate – 100/min, BP : 90/50mmhg Temp – 100F.

She was further icteric +, calf tenderness present.

Lab parameters showed neutrophilic leucocytosis, Increased inflammatory markers.

Serum Bilirubin -4mg/dl S. creatinine – 2.6mg Urea – 86 Platelet Count- 80000

What is the Diagnosis ? (2)

(2+3+2+4+4)

What are the possible differential diagnosis ? (3)

Discuss laboratory diagnosis for the above ? (2)

Discuss treatment for the above condition? (4)

What are the complications ? (4)



LEPTOSPIROSIS



- Zoonotic disease
- Caused by spirochetes of genus *Leptospira*
Pathogenic species : *L. interrogans*
- Primarily a disease of wild and domestic mammals
- Excreted in urine of infected animals



- Man gets infected either directly through contact with an infected animal or indirectly by water or soil contaminated with urine of infected animal *through skin abrasion or through intact mucous membrane*

- After entry, disseminate hematogenously to all organs - **leptospiremic phase**

Leptospire can be isolated from the bloodstream

- **Immune phase**

Appearance of antibodies

Disappearance of leptospire from the blood

Bacteria persist in various organs, including liver, lung, kidney, heart, and brain

CLINICAL FEATURES



- Incubation period : 7-12 days

Broad spectrum of clinical manifestations,
varying from asymptomatic infection to fulminant, fatal disease

- Biphasic



MILD LEPTOSPIROSIS



- Flulike illness
- Fever, chills, headache, myalgia
- Conjunctival suffusion (redness without exudate)
- Aseptic meningitis
- Muscle tenderness, Rash, Hepatomegaly & splenomegaly



SEVERE LEPTOSPIROSIS



- Weil's syndrome - hemorrhage, jaundice, and acute kidney injury
- Haemorrhagic manifestations
 - Pulmonary hemorrhage, Hematuria
- Mortality : Sepsis & MODS



What is the diagnosis ? (2 marks)



- Short Febrile Illness with Thrombocytopenia

Septic shock

Jaundice

Acute Kidney Injury

Multiple Organ Dysfunction Syndrome

Icteric Leptospirosis (Weil's disease)



What are the possible differential diagnosis ? (3 marks)



- Malaria
- Severe Dengue
- Scrub typhus
- Viral hepatitis
- Enteric fever
- Chikungunya



Discuss the laboratory diagnosis of the above ?

(2 marks)

- Blood sample : Serology, PCR, Culture
- Urine sample : PCR, Culture
- CSF : PCR, Culture





- PCR - most sensitive in the bacteremia phase of infection (first week)
- Serology - Antibody demonstration (detectable after 1st week)
 - Microscopic Agglutination Test
(live antigens representing different serogroups reacted with serum samples and agglutination tested by dark field microscopy)
 - ELISA
(detects antibodies reacting with a broadly reactive genus specific antigen)
 - Rapid card test (based on immunochromatographic assay principle)



Discuss the treatment for the above condition ? (4 marks)



- Mild clinical features with no comorbidities - Outpatient treatment
Follow up
- Severe disease and/or those with co-morbidities - Inpatient treatment
- General measures
- Early initiation of antibiotic therapy



General Measures

- Inotrope support
- Temperature chart
- Intake - Output chart
- Correct electrolyte imbalances (if any)
- Platelet transfusion (if drop in count/bleeding manifestations)
- Mechanical ventilation (if there is ARDS, Pulmonary hemorrhage)
- Dialysis



ANTIBIOTIC THERAPY



- Mild disease : Tab Doxycycline 100 mg orally twice daily for 7 days

OR

Tab Amoxicillin 500 mg orally four times daily for 7 days

OR

Tab Azithromycin 500 mg orally once daily for 3 days



- **Severe disease** : Injection Penicillin G 1.5 million units iv Q6H for 7 days

OR

Injection Doxycycline 100 mg iv twice daily for 7 days

OR

Injection Ceftriaxone 1 g iv once daily for 7 days

What are the complications ? (4 marks)



- Bleeding manifestations - Petechiae, ecchymosis, Pulmonary hemorrhage

Upper GI bleed, Hematuria

- Liver - Fulminant hepatitis
- GIT - Cholecystitis , Necrotizing pancreatitis
- Renal - Acute Tubular Necrosis, Acute Interstitial Nephritis, Pre-renal AKI
- Pulmonary - Pulmonary hemorrhage, Pneumonia, ARDS



- Cardiovascular - Myocarditis, arrhythmias
- CNS - Meningitis, Encephalitis
- Eye - Uveitis
- Muscle - Rhabdomyolysis
- MODS