MEES LINE OF NAILS, OSLER NODES, JANEWAY LESIONS AS EVIDENCE OF DISSEMINATED INTRAVASCULAR COAGULATION

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Purpose: We described an unusual case with the specific clinical manifestation of septic emboli, purpuric on the trunk and, Osler Nodes, hemorrhagic bullae on the nails, Janeway lesions, palms with multiple erythematous painful lesions, that are compatible with the diagnosis of disseminated intravascular coagulation. Mees Lines are the evidence of recanalization of microvessels.

Methods: A 14 years old girl with BH 163cm, BW 40kg, and BP 106/66mmHg had high fever for 3 days. The physical examination were unremarkable except the skin lesions show the Osler Nodes, hemorrhagic bullae of all fingers, purpura, pigmentation and gangrene change of the fifth digit over the left foot. She was admitted under the impression of sepsis suspect of septic embolism, disseminated intravascular coagulation.

Results: The laboratory data showed WBC10,900/cmm, neutrophile/lymphocyte ratio 76/10/10, Hemoglobin 14.7g/dl, platelet 263,000/cmm, CRP 4.9mg/dl, PT/control 12/1.23, APTT/control 35.4/32.4, Protein C 106.1%, Protein S 75.7%. Fibrinogen 481 mg/dl(200-400), D-dimer test 324.33ng/ml(<250ng/ml). Urine routine revealed leukocyte +++, RBC 0-4/HPF, WBC numerous/HPF. There were no bacteria growth on both blood culture and urine culture. During the course of therapy, the skin lesions resolved gradually but a new clear bullae was found on left hand. After discharge, she had dizziness and flush skin rash on face. Therefore brain MRI and BAEP, EEG were arranged but all showed there was no specific findings. The skin lesions were fading slowly and Mees Lines regeneration of nails were found at the OPD follow-up 3 months later.

Conclusions: The regeneration of the new Mees Lines are the evidence of regeneration of nails due to the previous micro obstruction of the minute circulation and minute capillaries, and they are the definite evidence of recovery from disseminated intravascular coagulation.

EDWARDSIELLA TARDA SEPTICEMIA IN A END STAGE RENAL DISEASE PATIENT PRESENTING WITH HEADACHE AND VOMITING: A CASE REPORT

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Purpose: Edwardsiella tarda, a member of the family Enterobacteriaceae, has recently become pathogenic, especially in patients with underlying disease. Edward infection can manifest as bacteremia, typhoid, gastroenteritis, local infection, and asymptomatic carrier state.

Case report: This 68-year-old woman of ESRD on maintenance hemodialysis had severe headache and vomiting. After admission, dopamine and norepinephrine were given for unstable hemodynamic condition. Brain CT showed empty sella. Abdominal CT revealed liver cyst, uterine myoma and bilateral nephrine were given for unstable hemodynamic condition. Brain CT showed liver cyst, negative crystal and no growth of bacterial culture. After treatment, she had high blood sugar. Novonorm 1# BID was used. Then she was discharged uneventfully.

Conclusions: Edwardsiella tarda is a rare causative agent of human infection, predominantly associated with enteritis commonly with watery diarrhea. Extra intestinal infections such as bacteremia with headache were reported infrequently.

THE PROMOTION OF INFLUENZA PREVENTION IN A PSYCHIATRIC HOSPITAL

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Purpose: Early flu prevention strategy could ensure patient and hospital personnel to obtain the appropriate and timely medical service during peak period of influenza. It can improve the quality of health care.

Methods: Management objectives and implementation strategies were: 1. To know well of flu trend, to start health monitoring system and mechanism including facilities, equipment and processes, especially outpatient department for influenza. 2. To provide appropriate medical services timely , blocking clusters incident that patients in flu influenza peak of the outbreak. According to vaccination process execution, to protect the interest of people for medical treatment, to improve health care quality. 3. Strengthen the staff, patients, community residents against influenza the prevention and treatment knowledge, to complete the education and training of influenza vaccination and field exercises; provides a perfect influenza pandemic contingency plans and the response of standard operating procedures, as well as early prevention, to avoid the risk of infection with severe complications or death.

Results: Totally held 4 sessions training course to the hospital staff and the public health for respiratory infections (including influenza and respiratory