Unusual site of disseminated Staphylococcus infection: erosive chest wall abscess

ABSTRACT

Erosive chest wall abscess as a complication following disseminated Staphylococcus aureus infection is rare. Here, we reported a case of disseminated Staphylococcus aureus infection with an erosive chest wall abscess. A 15 year-old gentleman, presented with 2 days of left knee swelling and high grade fever for 1 week duration. On admission, he was in sepsis with multiorgan dysfunction. Further investigations revealed that he had left calf abscess, tricuspid valve infective endocarditis, bilateral pulmonary septic emboli with loculated pleural effusion, bilateral pyelonephritis with left renal abscess, and chest wall abscess. The striking feature was the presence of the abscess which extended through the sternum into the mediastinum with manubriosternal dislocation, involvement of bilateral sternoclavicular joints and left clavicle cortical erosion. Both cultures from blood and pus (left calf abscess) grew Methicillin Sensitive Staphylococcus Aureus (MSSA).

Keyword: Staphylococcus aureus; Sepsis; Disseminated Staphylococcus aureus infection; Bacteremia; Multiorgan dysfunction; Methicillin; Mediastinum; Abscess; Chest wall abscess; Infective endocarditis