

The State of Deep Space Infections: Bad Bugs Colluding Against You

Patrick Bafuma RPAC
Emergency Medicine & Critical Care
Central California

Background

Deep space infections such as endocarditis, psoas abscess, and spinal epidural abscess are rare and potentially devastating entities that often elude early diagnosis, leading to increased morbidity & mortality. Common risk factors are overlooked, and this talk will provide the learner with a broad look at new-age risk factors.

Misunderstood Risk Factor #1: The immunocompromised.

Expanding your view of immunocompromised can greatly reduce your miss rate. This includes patients with “End-Stage” ANYTHING (lung, cardiac, liver, renal, etc), the malnourished / deconditioned (ie, undomiciled, frail, elderly, alcoholism), as well as your oncology/transplant patients, and those on biologics.

Misunderstood Risk Factor #2: People who put things where they don't belong.

Expanding your view of foreign bodies will help reduce your misdiagnosis rate as well. Invasive procedures that leave pending prostheses such as valve replacements and endovascular aortic repairs, as well indwelling ports, fistulas, catheters and foleys, are all risk factors. Obviously, IV drug usage falls into this category.

Misunderstood Risk Factor #3: The recurrently ill.

A significant number of patients with deep space infection have received an antibiotic prescription in the prior month, making it one of the most common red flags. Roughly two-thirds of patients are bacteremic on presentation, so seeding may happen and be discovered on a future visit. Furthermore, patients with prior deep space infection have a high recurrence rate.

Bottom line:

elevated ESR or CRP + risk factors = strongly consider further radiologic work up

pbafuma@gmail.com

Twitter @EMinFocus

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