



IMAGES IN INTENSIVE MEDICINE

Septic shock secondary to a giant abscess of skin and soft tissue ☆

Shock séptico secundario a un absceso gigante de partes blandas

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Available online 24 November 2021

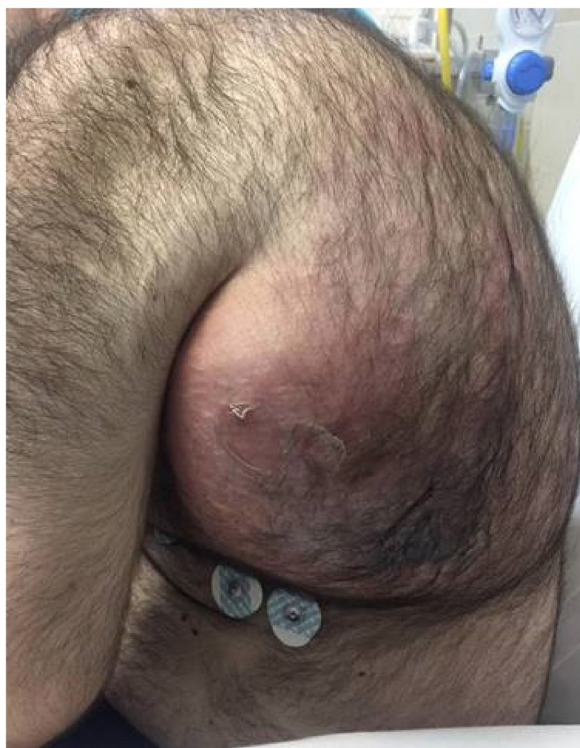


Figure 1

☆ Please cite this article as: Vela Colmenero RM, Ruiz García MI, Pola Gallego de Guzmán MD. Shock séptico secundario a un absceso gigante de partes blandas. *Med Intensiva*. 2022;46:114–115.

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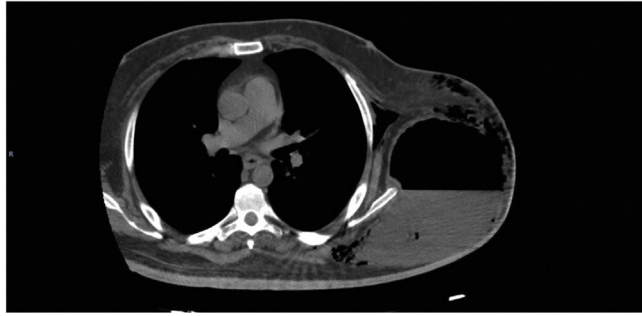


Figure 2



Figure 3

A 37-year-old hypertensive male with diabetes and poor adherence to therapy was admitted to intensive care due to septic shock secondary to soft tissue infection, with no prior traumatism (Fig. 1). Computed tomography revealed a large water-gas collection measuring $15 \times 13 \times 23$ cm in size (Fig. 2) in the subcutaneous cellular tissue of the left side of the chest lateral to the ribcage and scapula, in relation to an abscess associated to extensive subcutaneous cellular tissue emphysema surrounding the collection and located adjacent to the ipsilateral intercostal muscles (Fig. 3). Empirical antibiotic treatment was started and urgent surgical drainage and debridement of the cavity was performed (necrotizing fasciitis), with the removal of 1600 mL of purulent material from which *Morganella morganii* was isolated. The same organism was also isolated from blood cultures.

The course proved favorable, with the need for further surgical debridement on two occasions, and vacuum-assisted closure (VAC[®]) was finally applied and withdrawn after 21 days, presenting good granulation tissue for grafting.