

IMAGES IN INTENSIVE MEDICINE

Emphysematous cystitis. An unusual cause of septic shock Cistitis enfisematosa. Una causa inusual de shock séptico A. Mera*, J.C. Ruiz-Rodriguez, A. Sánchez, R. Ferrer

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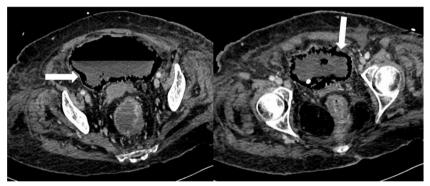


Figure 1

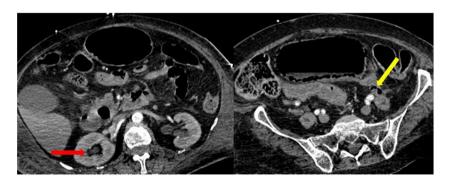


Figure 2

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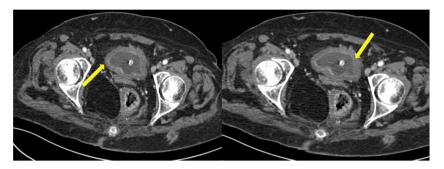


Figure 3

A 75- year-old woman was admitted to Emergency Department for acute rectal bleeding and hypotension. The evolution was to hemorrhagic shock and urgent surgery was required. A rectal laceration was observed and repaired. She had a favorable evolution in the post-operative period.

On day sixteen, she developed septic shock. A CT scan was performed (Fig. 1). It showed presence of air in the urinary bladder wall (white arrows), the left ureter (yellow arrow) and right renal pelvis (red arrow) (Fig. 2). The diagnosis of emphysematous cystitis was established. *Escherichia coli* was isolated in urinary and blood cultures. She was treated with endovenous fluid, vasoactive support and meropenem with favorable evolution. She was discharged from the hospital after 10 days. CT scan performed 2 months later showed air resolution (Fig. 3, yellow arrows).

Conflict of interest

On behalf of all authors, the corresponding author states that there is no conflict of interest.