A 56-Year-Old Woman with Rash, Paralytic Ileus, and Massive Gastrointestinal Bleeding

(See pages 1132–3 for the Answer to the Photo Quiz.)

A 56-year-old woman suddenly developed high fever, disseminated pruritic macular rash (figure 1), progressive abdominal distention, and massive gastrointestinal bleeding while receiving antimicrobial therapy for suspected acute bacterial meningitis. The patient had been admitted to the hospital 12 days earlier with an acute febrile illness and severe headache. Meningeal signs were found on physical examination. Cerebrospinal fluid examination findings were consistent with acute bacterial meningitis, but stains and cultures for bacteria, mycobacteria, and fungi showed no growth. Treatment with intravenous dexamethasone and antibiotic coverage with ceftriaxone and ampicillin was started, and the patient subsequently experienced a good clinical response. The patient was born in northern Peru and denied a history of recent travel. She also denied any underlying medical condition, but she reported that her sister had died 5 years earlier in Brazil due to T cell leukemia lymphoma. A duodenal aspirate sample was obtained because of information contained in the patient’s history (figure 2).

What 2 serious infections did this patient have?
Figure 2. Content of a duodenal aspirate sample obtained on the basis of the patient’s history.