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Disseminated Staphylococcal Infection Induced Rapidly Progressive Gangrene of Skin in a Preterm Neonate-Purpura Fulminans

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Image Article

A preterm (34 weeks) 1.5 kg, 72 hours old male neonate presented with letharginess, vomiting, and black patches over body since 24 hours. On examination baby was in shock and there was disseminated gangrenous skin patches over bilateral upper and lower limb (Figures 1 and 2), back and abdomen. Child was intubated, resuscitated and kept on ventilation and inotropes. Investigation reveals haemoglobin 12.3 gm, Leucocytosis, thrombocytopenia, deranged kidney function test and coagulation profile. Culture from gangrenous skin and blood showed growth of *Staphylococcus aureus*. Appropriate supportive management was contemplated but child ultimately succumbed within 24 hours of admission.



Figure 1: Showing gangrenous patch over medial aspect of right foot and leg.



Figure 2: Showing gangrenous patch over left leg.

Neonatal Purpura fulminans (PF) is a dermatological expression of haemorrhagic infarct due to intravascular thrombosis secondary to bacterial infections or deficiency of anticoagulants such as protein C and protein S. Neonatal PF is a rare disorder and associated with a high mortality [1,2]. Although group B streptococcus has been found as common cause of infectious PF, *Staphylococcus aureus* induced PF has been described [1,3,4].

Reference

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