

Haemoperitoneum in a Case of Dengue Fever

Authors : Sagarjyoti Roy

Abstract : Dengue is an arboviral infection, belonging to family flaviviridae, comprising of four serotypes; DENV1, DENV2, DENV3 and DENV4. All four serotypes are capable of causing full-spectrum of clinical features, ranging from self-limiting fever to severe dengue hemorrhagic fever (DHF) and dengue shock syndrome (DSS). Complications may affect any organ system, including those involving gastrointestinal system and serositis. We report a case, of a 28 years, non-alcoholic male, presenting with a 7 day history of fever and malaise followed by abdominal pain and distension, from 4th day of fever. He was admitted in medicine department of RG KAR medical college hospital. Dengue fever was confirmed by NS1 and dengue IgM positivity. Platelet count was 30,000/cc (1.5- 4 lac/cc) and haematocrit was 52% (38- 50% for men). Clinicoradiological findings revealed bilateral pleural effusion, ascites and splenomegaly. Ascitic fluid was hemorrhagic in nature, with a high protein and RBC content. Liver function tests revealed mild transaminitis with normal coagulation profile. Patient was managed conservatively. A diagnosis of dengue fever complicated by serositis and spontaneous haemoperitoneum was made. The symptoms subsided after a hospital stay of 10 days. The case highlights haemorrhage into peritoneal cavity as a possible complication of dengue fever. Although a definite explanation requires more detailed studies, platelet or endothelial cell dysfunction might be contributory.

Keywords : ascites, dengue, haemoperitoneum, serositis

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