中文題目:抗細胞核細胞質抗體血管炎病人因周邊巨細胞病毒腸炎所導致的致命性出血---個案報告

英文題目: Cytomegalovirus enteritis related gastrointestinal bleeding in patient with Perinuclear Anti-Neutrophil Cytoplasmic Antibodies (P-ANCA) vasculitis: a case report

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Case: A 66-year-old man, with history of end stage renal disease under regular hemodialysis and crescent glomerulonephritis due to Perinuclear Anti-Neutrophil Cytoplasmic Antibodies (P-ANCA) vasculitis, was admitted due to massive hemoptysis. Endotracheal tube was intubated with mechanical ventilator due to respiratory failure, steroid pulse therapy with methylprednisolone 250mg and cyclosoprin 100mg were administrated for 3 days for pulmonary hemorrhage. Plasma pheresis was also arranged.

Discussion: Cytomegalovirus(CMV) infection is common in immunocompromised patient1, but rare for overt small bowel bleeding2. Clinical manifestation of CMV enteritis ranged from self limited abdomen discomfort to intestine perforation. ACG guideline6 suggested computed tomographic enterography or video capsule endoscopy before enteroscpy in sub-acute ongoing small bowel bleeding.