中文題目:陰道加德納菌引起的產氣性膀胱炎

英文題目:Gardnerella vaginalis infection related emphysematous prostatitis

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Case report: A 67-year-old male with a history of 1. Three vessels coronary artery disease, 2. Type 2 diabetes mellitus(HbA1C:8.4 2019/5), 3. Chronic constipation, 4. hemorroid presented to emergent department with hematuria, lower abdominal pain, dysuria, bloody stool and fever for 5 days. Laboratory studies were notable for pyuria on urinalysis(white blood count(WBC):374/ul), leukocytosis(WBC:16500/ul), levated c-reactive protein(12.39 mg/dl). Subsequent computed tomography (CT) of the abdomen revealed emphysematous prostatitis of the right prostate lobe Broad-spectrum antibiotics with flomoxef and intravenous fluid therapy were initiated. Urine culture reported *gardnerella vaginalis*. We arrange transrectal ultrasound of prostate and found still a lot of air content. Then we arrange transurethra insion of prostate abscess. After operation, his condition gradually improved and he was discharged home.

Background: Emphysematous prostatitis is a rare sequela of complicated urinary tract infection and is more commonly found in patients with immunosuppression, diabetes mellitus with poor glycemic control, liver cirrhosis, alcoholism, or recent urethral instrumentation. The most common pathogen in patients with diabetes is *K. pneumoniae*. However, cases of emphysematous prostatitis caused by *Gardnerella vaginalis* are extremely rare. Delay in diagnosis can cause serious sequelae, including rupture of the abscess into the ischiorectal fossa or into the perivesicle space, which are associated with morbidity and death. For treatment, appropriate antibiotics and adequate drainage or incision should be combined.