

## Cefixime

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### Thrombocytopenia, oral erosions and petechiae: case report

A 19-year-old woman developed thrombocytopenia, oral erosions and petechiae during treatment with cefixime as antibiotic therapy.

The woman presented to the emergency department with a seven-day history of intermittent fever as well as sore throat. Three days prior to the presentation, she had started receiving oral cefixime 400 mg/day. Additionally, she reported a sudden onset of hyposmia, fatigue, asymptomatic cutaneous and oropharyngeal lesions, which began two days before her admission. At the time of admission, she was afebrile. Her vital signs were unremarkable. Physical examination showed erythematous macules, papules and petechiae on the lower extremities. Erosions, ulcerations, and blood crusts were also noted on the inner surface of the lips, palatal and gingival petechiae. Pulmonary ultrasound and chest radiograph were also normal. Complete blood cell count results were as follows: increased WBC count, AST was 200 U/L, ALT was 140 U/L, lactic dehydrogenase (LDH) 300 mU/mL and severe thrombocytopenia. Severe thrombocytopenia, oral erosions and petechiae were considered as related to the cefixime therapy. Latency time from the onset of symptoms was 7 days. Real-time reverse transcriptase–polymerase chain reaction (PCR) from a nasopharyngeal swab was found positive for SARS-CoV-2.

The woman's antibiotic therapy was discontinued. She was treated with immune globulins (unspecified) and methylprednisolone for five days. On day 5, her systemic symptoms disappeared. However, some maculopapular lesions persisted on the legs. The platelet count also increased to 98 000 /mm<sup>3</sup>, while AST, ALT and LDH returned to baseline. On day 10, WBC count and platelet count normalised. The skin and mucosal lesions also disappeared.

Ciccarese G, et al. Oral erosions and petechiae during SARS-CoV-2 infection. *Journal of Medical Virology* 93: 129-132, No. 1, 2021. Available from: URL: <http://doi.org/10.1002/jmv.26221>

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