

[PICTURES IN CLINICAL MEDICINE]

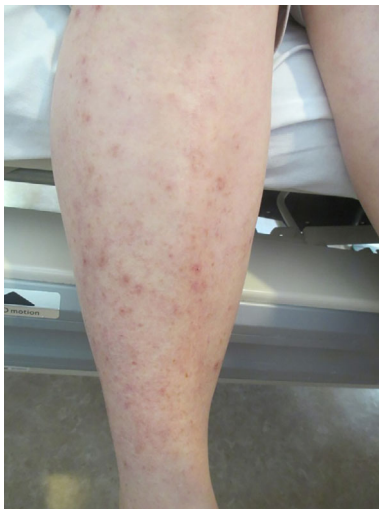
Scrub Typhus with Respiratory Symptoms

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Key words: scrub typhus, orientia tsutsugamushi, respiratory symptoms, vasculitis, thickened interlobular septa

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Picture 1.



Picture 2.



Picture 3.



Picture 4.

A 56-year-old woman who had gone trekking 19 days earlier presented with a 10-day history of a fever, dry cough, and rash. A physical examination revealed enlarged

lymph nodes in the inguinal, axillary, and posterior cervical regions, systemic erythema, two scars on her back (Picture 1, 2), and bilateral pitting edema of the lower extremities. Laboratory data revealed significant anemia, thrombocytopenia, the presence of atypical lymphocytes, elevated hepatobiliary enzyme and elevated C-reactive protein levels, and the presence of IgM against *Orientia tsutsugamushi*.

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Therefore, the patient was diagnosed with scrub typhus. Chest X-ray and computed tomography revealed bilateral thickened interlobular septa in the lower lungs with plural effusion (Picture 3, 4). Respiratory symptoms and radiographic abnormalities are sometimes present in patients with scrub typhus; however, they are relatively rare in Japan (1, 2). The patient's symptoms may have been due to vasculitis caused by *O. tsutsugamushi*. Accordingly, 200 mg/day of doxycycline was administered, to which the patient responded well, and she was discharged after 1 week.

The authors state that they have no Conflict of Interest (COI).

References

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