

Images in Infectious Diseases

Pyogenic liver abscess following perforated appendicitis

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A 26-year-old male patient presented to the emergency department with abdominal pain, fever, weakness, and loss of appetite, which he had been experiencing for approximately four days. Laboratory studies revealed leukocytosis ($19 \times 10^3 \mu\text{L}$) and an elevated C-reactive protein level (328 mg/L). Computed tomography (CT) showed a subcapsular abscess in the right hepatic lobe (Figure 1). We observed that the appendix was attached to the liver capsule and opened to the liver with a fistula (Figure 2). Ultrasound-guided percutaneous drainage of the subcapsular liver abscess was performed. Following antibiotic treatment, the patient was discharged for outpatient follow-up and considered for an appendectomy.

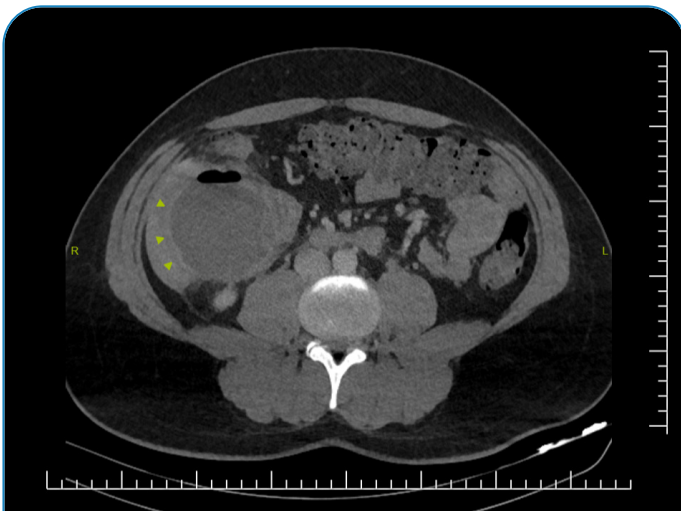


FIGURE 1: CT shows right hepatic lobe subcapsular abscess (arrowheads).

Pyogenic liver abscess is extremely rare. It can lead to death if left untreated¹. Following the diagnosis, appropriate treatment should

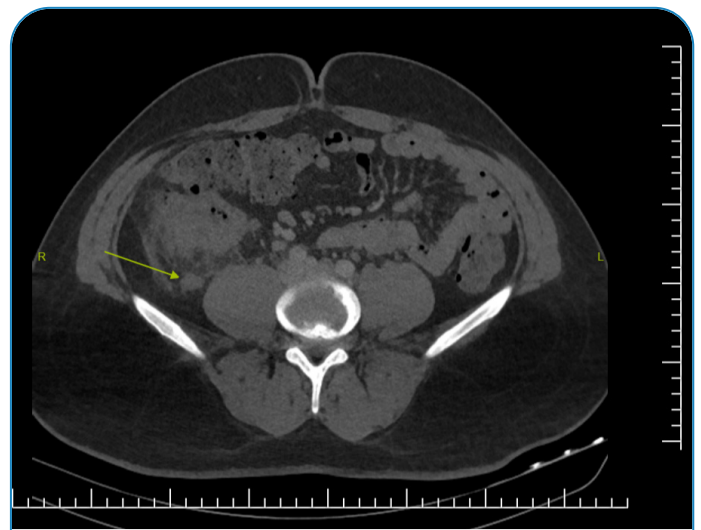


FIGURE 2: Acute appendicitis (arrow) can be observed.

be applied with great care, pylephlebitis should be kept in mind, and portal vein involvement should be considered in imaging².

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REFERENCES

1. Armstrong T, Dluzewski S, Yu D. Appendicitis with direct fistulation into the liver: A forgotten cause of pyogenic liver abscess. *BJR Case Reports*. 2020;6(4):20200101.
2. Plemmons RM, Dooley DP, Longfield RN. Septic thrombophlebitis of the portal vein (pylephlebitis): Diagnosis and management in the modern era. *Clin Infect Dis*. 1995;21(5):1114–20. Available from: <https://doi.org/10.1093/clinids/21.5.1114>. PMID: 8589130.

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