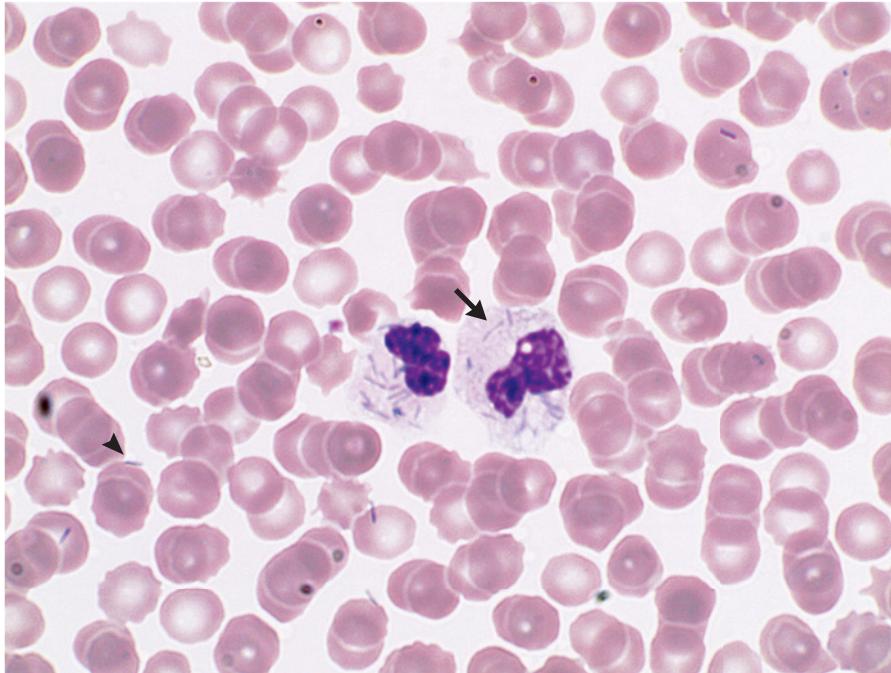


IMAGES IN CLINICAL MEDICINE

Chana A. Sacks, M.D., *Editor**Capnocytophaga canimorsus* Infection

A 62-YEAR-OLD MAN PRESENTED TO THE EMERGENCY DEPARTMENT WITH a 1-day history of fever and a 3-day history of chest pain. His medical history was notable for coronary heart disease and for a splenectomy that he had undergone after a car accident. Four days before presentation, he had been bitten on the left hand by his dog and had sustained three bite wounds. Laboratory studies showed a white-cell count of 16,700 per cubic millimeter (reference range, 3900 to 10,200), a platelet count of 31,000 per cubic millimeter (reference range, 150,000 to 370,000), and a procalcitonin level of more than 100 μg per liter (reference value, ≤ 0.05). Blood cultures were obtained, and treatment with broad-spectrum antibiotic agents, intravenous fluids, and norepinephrine was initiated. Review of a peripheral-blood smear showed the presence of both intracellular (arrow) and extracellular (arrowhead) bacilliform bacteria. *Capnocytophaga canimorsus* was cultured after 17 hours. *C. canimorsus* is part of the oral flora of healthy cats and dogs and can be transmitted to humans through animal bites. The bacterium can cause particularly severe infection in patients with a history of splenectomy. Despite treatment, the patient died 2 days after admission.

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Robert D.H. Markewitz, M.D.

University Hospital Schleswig-Holstein
Lübeck, Germany
robert.markewitz@uksh.de

Tobias Graf, M.D.

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Lübeck, GermanyThis article was updated on September
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