

Clinical Image

Necrotizing Pneumonia: A Rare Complication of Pneumonia

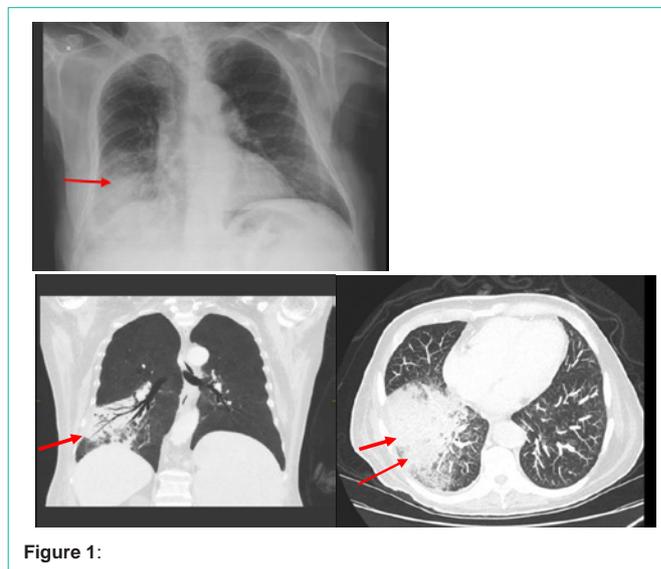
Cadena I* and Grego M

Department of Internal Medicine, Hospital Distrital de Santarém, Portugal

***Corresponding author:** Cadena I, Avenida Bernardo Santarém, Santarém, Portugal**Received:** June 10, 2019; **Accepted:** June 22, 2019;**Published:** June 29, 2019

Clinical Image

Male 82 years old with a history of mantle-type NHL and infrarenal abdominal aortic aneurysm. He was admitted to the emergency department, due to clinical symptoms of fever of 39°C, dyspnea (FR 24), BP hypotension: 100/60 and thorax pain. Physical examination showed dyspnea and diminished vesicular murmur in the right lung base with crepitating rales and bilateral edema in the lower limbs. Analytically presented: hemoglobin 7.2 Platelets. Chest X-ray showed right lower lobar opacification. During admission, the patient's clinical condition worsened, while there was no response to the antibiotic treatment instituted. Regarding this situation, blood cultures were performed with isolation of *P. aeruginosa*. Cefepime was administered. Chest CT-scan showed area of pulmonary consolidation with air bronchogram in the right lower lobe, centered on the lateral, with several cystic images, aspects that in the set in aspects in the dependence of necrotizing pneumonia. Progressive deterioration of the clinical condition with multiple organ failure, dying 72 hours after admission.

**Figure 1:**