

DOI: 10.21767/2471-8041.100082

## Massive Intrapelvic Abscess after Injection into the Thigh in a Patient with Tuberculosis

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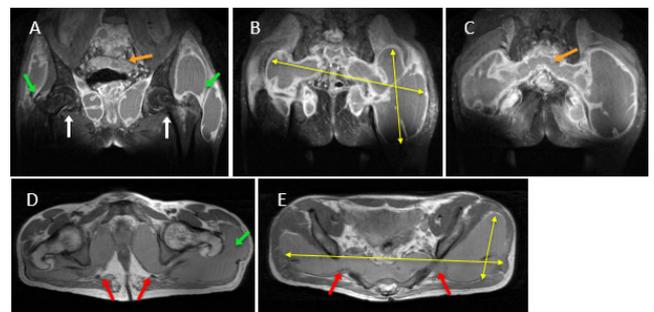
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Received: March 10, 2018; Accepted: March 20, 2018; Published: March 22, 2018

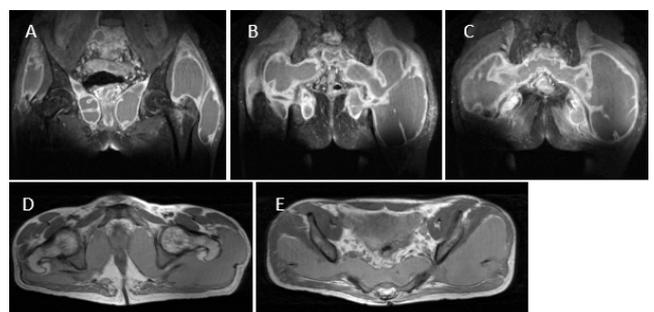
Citation: Frey SP, Rößler P, Pflugmacher R, Schmolders J, Platzek R, et al. (2018) Massive Intrapelvic Abscess after Injection into The Thigh in a Patient with Tuberculosis. Med Case Rep Vol.4 No.2: 147.

### Clinical Image

A 33-year-old male from a refugee camp was admitted to our emergency room with pelvic pain, massive peri-trochanteric and gluteal swelling. 2 months before he has had a local anesthetic injection into the left proximal thigh after having pain. He had no history of spinal or pelvic disorder or of infection. Magnetic resonance imaging revealed a massive peri-trochanteric and intrapelvic abscess formation that measured 27.3 cm by 16.7 cm in the greatest dimensions on the coronal views and 30.8 cm by 7.7 cm in the axial views (Panel A-C show the coronal view (MRI STIR), Panel D-E show the axial view (MRI T1); green arrows show the peri-trochanteric extension, white arrows the hip joints, orange arrows the pre-sacral area, yellow arrows the abscess extension and the red arrows showing the abscess running through the greater ischiadic foramen) (Figures 1 and 2). The abscess formation was immediately operatively released through bilateral Kocher-Langenbeck approaches. An abscess formation like this is extremely rare in a young and healthy individual. It is more likely to be seen in patients with immune suppression. Microbiological examination revealed mycobacterium tuberculosis.



**Figure 1** Magnetic resonance imaging [Panel A-C show the coronal view (MRI STIR), Panel D-E show the axial view (MRI T1); green arrows show the peri-trochanteric extension, white arrows the hip joints, orange arrows the pre-sacral area, yellow arrows the abscess extension and the red arrows showing the abscess running through the greater ischiadic foramen].



**Figure 2** Magnetic resonance imaging showing massive peri-trochanteric and intrapelvic abscess formation (without labels and arrows).