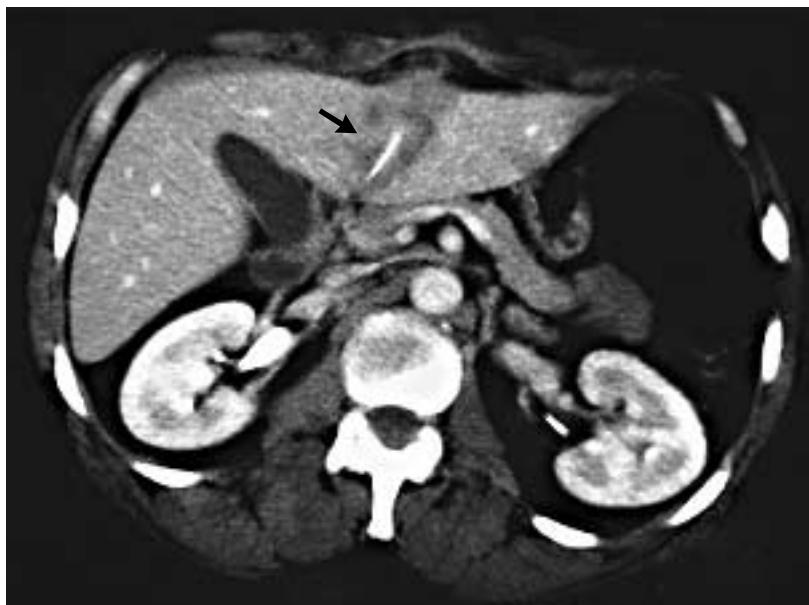




Images in Clinical Medicine

*Liver Abscess Due to Eikenella corrodens from a Fishbone*

A 53-year-old man presented with a four-week history of abdominal pain and a tender, nonerythematous mass (5 by 5 cm) in the right upper quadrant. He had a temperature of 36.3°C, a leukocyte count of 8100 per cubic millimeter, and normal liver-function tests. A computed tomographic (CT) scan showed a mass in the left lobe of the liver with a thin, linear calcification and invasion beyond the capsule to the abdominal wall. The linear density within the abscess (arrow) was initially thought to be an artifact. A CT-guided biopsy led to drainage of 14 ml of purulent fluid; a Gram's stain of the fluid showed gram-positive cocci in clusters, pairs, and chains and gram-positive and gram-negative rods. Treatment was initiated with intravenous vancomycin and piperacillin-tazobactam. When the patient's condition did not improve, surgical drainage led to the discovery of a thin fishbone in the abscess. The cultures grew *Eikenella corrodens*, an organism typically associated with human bites, which was presumably acquired from the patient's oral cavity while he was eating fish. The fishbone apparently penetrated the wall of the first portion of the duodenum and passed through the posterior surface of the liver to the left lobe, near the abdominal wall. The patient's condition rapidly improved after the foreign body was removed, and he was discharged while taking oral amoxicillin-clavulanate. He recalled taking a fishing trip three months earlier, but he had no recollection of ingesting the fishbone.

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