

IMAGES IN CLINICAL MEDICINE

Disseminated Gonococcal Infection



A 23-YEAR-OLD WOMAN WITH A ONE-WEEK HISTORY OF SWELLING AND pain in her right third finger (Panel A, arrow) was seen by an orthopedist, who prescribed cephalexin and indomethacin for suspected tenosynovitis. Over the next several days, a painful rash developed on the patient's extremities. She presented to the emergency department the day after pain developed in her right ankle with generalized malaise. Physical examination showed a temperature of 39.4°C (103°F) and a rash (Panels B and C) that was composed of both macular lesions (arrows) and pustular lesions (arrowheads). A complete blood count showed a leukocyte count of 31,000 cells per cubic millimeter. The patient reported having had unprotected sexual intercourse during the previous three weeks. A cervical culture was positive for *Neisseria gonorrhoeae*. The patient's symptoms and rash resolved within three days after treatment with intravenous ceftriaxone.

Copyright © 2005 Massachusetts Medical Society.

Stephan Russ, M.D.
Keith Wrenn, M.D.

Vanderbilt University Medical Center
Nashville, TN 37232