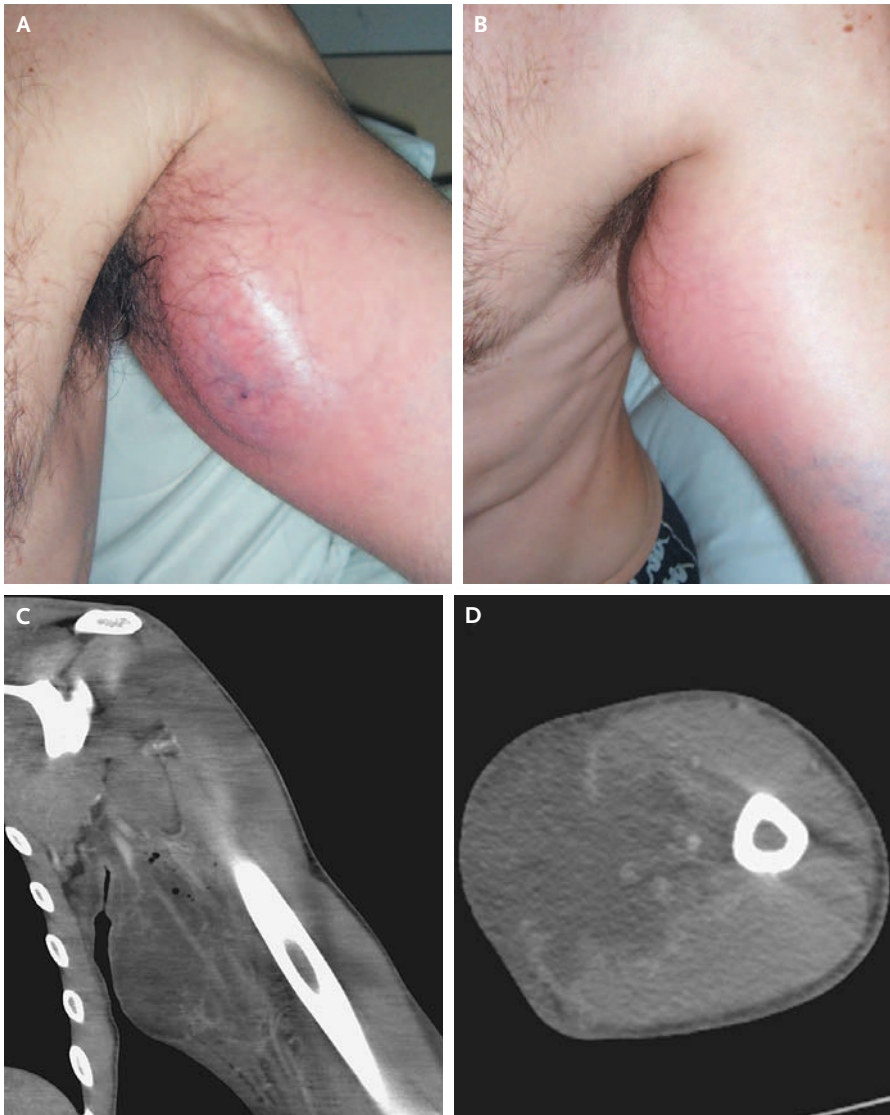


IMAGES IN CLINICAL MEDICINE

Methicillin-Resistant *Staphylococcus aureus* Abscess after Intramuscular Steroid Injection



A 25-YEAR-OLD BODYBUILDER was hospitalized with a painful left upper arm five days after injecting 1.5 ml of a steroid preparation into the medial aspect of his left biceps brachii muscle. He reported using a sterile needle obtained from a pharmacy, but the source of the steroid vial was unknown. At the injection site, there was a tender, erythematous, palpably fluctuant mass, 10 by 6 cm (Panels A and B). The level of creatine kinase was 18,100 U per liter, and the white-cell count was 20.6×10^3 per cubic millimeter. Computed tomography revealed a large abscess containing gas in the medial left upper arm (Panels C and D). The abscess was incised and drained, after which extensive débridement was performed. Microscopy of a skeletal-muscle sample showed acute necrotizing myositis, and culture of a swab from the deep wound revealed methicillin-resistant *Staphylococcus aureus*. Vancomycin was given intravenously, followed by oral trimethoprim-sulfamethoxazole. The wound healed well over the next several days. The patient was discharged home 15 days after the abscess had been drained.

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