Ticarcillin Sodium / Potassium Clavulanate (Timentin) Induced Subcutaneous Hemorrhage - A Case Report

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Case Report(s)

A 72 year old elderly male who was a known case of COPD was admitted to the hospital with one week history of productive cough, exertional breathlessness and generalized body swelling suggestive of an acute exacerbation with congestive cardiac failure. Patient was in hypotension, X-ray chest revealed a consolidation in the right lower lobe, complete blood count showed leucocytosis and blood culture grew Pseudomonas aeruginosa. A diagnosis of sepsis syndrome was made and the patient was started on Ticarcillin Clavulanate and supportive therapy. Two days after treatment the patient developed a diffuse subcutaneous hemorrhage in the whole of the chest and the abdominal wall. (Figure A, B, C). Though the patient was not on any kind of antiplatelet or anticoagulant therapy still the development of hemorrhage was an enigma. Platelet count, bleeding and clotting time, prothrombin time, activated partial thromboplastin time, hepatitis serology and liver functions were normal. A diagnosis of Timentin induced subcutaneous hemorrhage was made. The patient died after 5 days owing to multi organ failure. Timentin is known to cause thrombocytopenia, leucopenia, neutropenia, eosinophilia, reduction of hemoglobin or hematocrit, abnormalities of coagulation, platelet aggregation and prolongation of prothrombin time and bleeding time more in patients with renal impairment. Subcutaneous bleeding manifestations have occurred acutely after the use of this drug at the injection sites though rare. Activated partial thromboplastin time (APTT) has been shown to increase with the use of Ticarcillin resulting in increased bleeding tendency [1-3]. Treatment includes withdrawal of the offending drug and symptomatic treatment.

References

Illustrations

Illustration 1

Diffuse subcutaneous hemorrhage in the whole of the chest and the abdominal wall anteriorly and laterally

Illustration 2

Diffuse subcutaneous hemorrhage in the whole of the chest and the abdominal wall anteriorly and laterally
Illustration 3

Diffuse subcutaneous hemorrhage in the whole of the chest and the abdominal wall anteriorly and laterally along with some focal ulcerated areas.

Illustration 4

X-ray Chest PA view depicting a consolidation in the right lower lobe.