

IMAGING IN INTENSIVE CARE MEDICINE

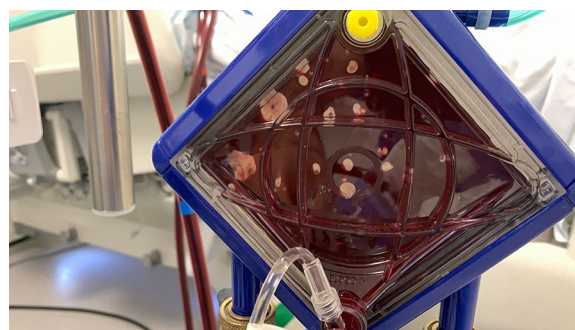


All that glitters is not gold: an unusual presentation of *S. aureus* sepsis during ECMO

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A 53-year-old male was submitted to veno-venous extracorporeal membrane oxygenation (ECMO) due to coronavirus disease 2019 (COVID-19) pneumonia for 84 days, without relevant complications related to the circuit itself until an urgent return cannula change was needed due to the rigid connector fracture with major bleeding. The cannula was promptly switched from the right to the left internal jugular vein. Two days after, the patient presented clinical and biochemical features of sepsis. Vancomycin was started and posteriorly switched to oxacillin, since blood cultures were positive for methicillin-sensitive *Staphylococcus aureus*. The day after, the new oxygenator presented numerous round coalescent abscesses through the venous side. As the signs of sepsis still persisted, we decided to wean the patient off ECMO. We then identified also an abscess stuck to the head of the rotational pump. Blood samples collected from the venous port of the membrane and from the pump were both positive for *S. aureus*. The patient ultimately died from septic shock 5 days after being decannulated.



Venous side of the ECMO oxygenator showing multiple rounded, yellowish images compatible with abscesses

Compliance with ethical standards

Conflicts of interest

We declare no competing interests.

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