A Retrospective Study of Patients with Scrub Typhus Admitted In a Tertiary Care Hospital from January 2016-January 2017

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Abstract: This study is aimed at studying the Geographical profile, Clinical Features, IgM serology positivity, Percentage of patients who need Intensive care and outcome. It also wants to emphasize that all patients with Fever, ARDS, Encephalitis and MODS should be thoroughly investigated to rule out Scrub Typhus

Keywords: (Scrub typhus, Geography, clinical profile, Intensive care and Outcome)

I. Introduction

Scrub typhus is one of the Re emerging Acute febrile illness caused by Orientia Tsutsugamushi and Transmitted by the bite of the larva of Trombiculid Mite,Globally one million cases occur every year. There is a re emergence of scrub typhus with Multi organ Involvement

Aim Of The Study-To study the Geographical distribution, clinical Profile, IgM serology positivity, Percentage of patients requiring Intensive management and outcome. Also to emphasize that scrub typhus should be ruled out in all patients with Fever,ARDS, Encephalitis and MODS with Appropriate Investigations

II. Methodology

A Retrospective study is carried out for a period of one year from January 2016-January 2017. Trichy Geographically being the central district of Tamilnadu and patients from nearby districts like Karur, Pudukottai and Perambalur are referred here for tertiary care treatment. The presenting clinical features of all the patients are recorded with regard to the place from where referred, Age, Sex and Occupation. Investigations to confirm Scrub yphus IgM ELISA done with other tests to rule out Malaria, Dengue, Leptospirosis and Enteric fever. In patients with confirmed scrub typhus LFT, RFT, Electrolytes and appropriate Imaging studies done.

Inclusion Criteria- All patients who were having fever and IgM ELISA positive were included in the study
Exclusion Criteria- All patients with Fever and positive for Malaria, Dengue, Leptospirosis and Enteric fever were excluded from the study

III. Results

This case series consists of eighteen patients. Fever for atleast 5 days before presentation. 8 out of 18 patients had Eschar. 6 out of 18 patients had difficulty in breathing of which 2 patients needed ventilator support and subsequently expired. 5 out of 18 patients had altered sensorium and 1 patient expired. 4 out of 18 patients had Bleeding manifestation at the time of presentation

IV. Figure And Tables

Sex distribution-34% males and 66% females
Age distribution-20 to 30 yrs -30%, 30 to 40 yrs-20%, 40 to 50 yrs-20%, 50 to 60 yrs-20% and 60 to 70-20%
System involved-Respiratory-43%, Cardiovascular-21% and central nervous system-36%

V. Conclusion

This study elaborates the specific Geographical areas common for scrub typhus and also stresses early suspicion for scrub typhus in patients with Fever, ARDS, Encephalitis with IgM sero positivity. Early treatment reduces Mortality of patients, Drugs of choice being Doxycycline and Azithromycin

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