

**Spinal epidural abscess caused by group B
Streptococcus in a diabetic woman presenting with
febrile low back pain**

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摘要

Abstract

Because spinal epidural abscess is usually ignored in the preliminary differential diagnosis of low back pain, appropriate treatment may be delayed. Adult spinal epidural abscess is sparsely caused by the pathogen known as group B Streptococcus. In this paper, we report the case of a diabetic woman with lumbar epidural abscess and vertebral osteomyelitis caused by group B Streptococcus. Owing to the main manifestations of fever, pyuria and low back pain, which originally led us to suspect acute pyelonephritis, empirical antibiotics were applied. When the symptoms and signs persisted, other focal infections were considered. Magnetic resonance imaging led to the correct diagnosis. Group B Streptococcus was isolated from the blood but not from the abscess itself, probably due to the prior antibiotic treatment. The patient recovered well after surgical debridement followed by prolonged intravenous penicillin therapy. Therefore, despite the potential for fatality, our results suggest that epidural abscess can be successfully treated with surgery and antibiotic therapy provided that it is detected early enough.