NEONATAL PURPURA FULMINANS AS A RARE CUTANEOUS MANIFESTATION OF EARLY ONSET GROUP B STREPTOCOCCAL INFECTION

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Introduction: Neonatal Purpura fulminans (PF) is a rare haematological emergency characterized by sudden onset of skin haemorrhage and necrosis with peripheral gangrene. Gram negative organisms are the commonest cause of acute infectious type and few cases of causative neonatal group B streptococcus (GBS) disease were reported worldwide.

Case report: A full term boy was delivered vaginally with a normal Apgar score, weighed 3100 grams and discharged at the age of 36 hours of life. The mother with an unknown GBS status antenatally came to the emergency department (ED) in active labour and no prophylactic antibiotics were given. There was no family history of haematological disorders. The mother brought him at the age of 43 hours of life to the ED with fever (39.5°C) and lethargy. Neonatal sepsis was suspected and started on intravenous Ampicillin and Gentamicin immediately. He rapidly deteriorated and required aggressive resuscitation then shifted to NICU. Two hours later, a purpuric rash developed over scrotum, upper and lower extremities with gangrenous fingers and toes. Initial workup revealed a disseminated intravascular coagulopathy and both blood and CSF cultures grew GBS. He had normal levels of Protein C and Protein S. Despite maximum support and proper antibiotics coverage, he developed multisystem-organ-failure and died 48 hours after admission.

Conclusion: Neonatal PF secondary to early onset GBS infection is a fatal condition that should not be missed. Screening of pregnant women for GBS colonization and implementation of the recommended guidelines are the most important preventative measures.