

A Double Trouble: Pyogenic Iliopsoas Abscess With Hip Septic Arthritis In A 10 Year-Old Child

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INTRODUCTION:

Simultaneous occurrence of psoas abscess and septic arthritis of the hip are rare in children. Radiological imaging is important in making diagnosis. We present a case of a 10-year old-child with iliopsoas abscess complicated by right hip septic arthritis after a fall.

CASE REPORT:

A 10-year-old child with no comorbidities presented to us with a month history of lower back pain, right hip pain and fever. The child was unable to ambulate due to the pain. Prior to that, child had a fall at playground. The pain was associated with fever.

On examination, tenderness at lower back and right hip but no swelling. Right hip was in flexed position. Radiograph of the pelvis (Figure 1) showed irregularity of the right femoral head with hip subluxation. Magnetic Resonance Imaging (MRI) of the lumbosacral spine and right hip was done to further confirm the diagnosis. MRI showed right hip septic arthritis with osteomyelitis and right psoas collection.

Open drainage of the psoas abscess and right hip arthrotomy washout was done. Intraoperatively, turbid synovial fluid was noted at right hip joint, pus at right iliopsoas and osteomyelitic changes of right femoral head and ilium. Hip joint was unstable after surgery. Intraoperative culture yielded *Staphylococcus aureus*. Patient was given intravenous cloxacillin(1)

DISCUSSIONS:

Pyogenic infection of the iliopsoas muscle complicated with hip septic arthritis is uncommon. In this patient, there was a trauma. Trauma to the iliopsoas muscle can lead to hematoma formation which may lead to iliopsoas abscess formation. Infection of the iliopsoas could extend to the hip joint by

iliopectineal bursa which communicates with the hip joint in 15% of patients (2). Surgical drainage can be done via either open method or percutaneous drainage. Delay in diagnosis and treatment will lead to permanent damage such as avascular necrosis of the femoral head and muscle spasms may occur predisposing to hip dislocation (1).



Figure 1

CONCLUSION:

High index of suspicion is key in making diagnosis and will further be supported by radiological imaging.

REFERENCES:

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2. Aygun D et al., Iliopsoas Abscess with Septic Arthritis of the Hip Following Trauma in Two Adolescents. *JSM Microbiology* 2016 4(2): 1033