A case of liver abscess after permanent pacemaker implantation

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Abstract

Liver abscess after pacemaker operation has not been reported before. We reported a 68-year-old male patient who developed a liver abscess after permanent pacemaker implantation. After 2 weeks of anti-infection treatment, the patient's symptoms were relieved.

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Data availability statement

The original figures and data are available from the corresponding author by request.

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Conflict of Interest

The authors declare that there were no conflict of interests.

Ethics Statement

This study was approved by the ethics committee of Zhongshan Hospital Fudan University, written informed consent was obtained from the patient.

Informed consent

This study was conducted with informed consent of patients.

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Abstact

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A 68-year-old man was diagnosed with third degree A-V block in our hospital due to syncope 2 times. Permanent pacemaker implantation was performed after evaluation. The patient had fever on the second day after the operation. The body temperature was 38.0, the right upper abdomen tenderness and percussion pain. Shilver occured every time when the right upper abdomen was pressed. Abdominal CT showed liver abscess (Figure A and B) (no obvious abnormality was found in abdominal ultrasound before operation). Cefuroxime and vancomycin were given for anti-infection treatment. After 2 weeks of treatment, the patient's symptoms were relieved and the temperature was normal. The abdominal CT showed that the liver abscess was obviously absorbed (Figure E and F). After 1 year follow-up, no abnormality was found in the pacemaker bag, and no infection was found again.

Liver abscess caused by pacemaker operation has not been reported before¹. The infection may be caused by the intake of exogenous bacteria during the operation, resulting in bacteremia². Due to pacemaker electrode was adjacent to the liver(Figure C and D), abnormal sinus was formed. Exogenous bacteria leaded to liver abscess, abdominal pain, fever and other infection symptoms by abnormal sinus³. This case suggests that we should pay the high attention to aseptic operation, the prophylactic application of antibiotics before operation is also quite necessary, and we should also focus on monitoring the temperature, clinical manifestations and related examinations of patients after operation.

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Author Contributions

All authors have participated in the work and have reviewed and agreed with the content of the article. Fei Hao and Haixiong Wang conceived and interpreted the data. Fei Hao drafted the manuscript. Liping Guo revised it critically.

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