

AN 85-YEAR-OLD WOMAN WITH ALTERED MENTAL STATUS AND PALPABLE PURPURA.
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LEARNING OBJECTIVE: Determine the differential diagnosis of palpable purpura in the setting of altered mental status.

CASE: An 85-year-old woman with multiple medical problems presented with altered mental status and a rash. Physical exam revealed numerous petechiae and purpura in dependent areas, and lab studies showed evidence of acute kidney injury and meningitis. The patient clinically deteriorated and was pronounced dead on hospital day 4. An extensive infectious workup was unremarkable. While an exact cause of her presentation remains undetermined, her rash was diagnosed as a cutaneous small vessel vasculitis and was presumed secondary to a subacute bacterial endocarditis.

DISCUSSION: Cutaneous small vessel vasculitis is characterized by inflammation of post-capillary venules in the skin and manifests primarily as palpable purpura. The differential diagnosis includes Rocky Mountain spotted fever and meningococemia, although our patient had no known exposures. It may be precipitated by many infections, drugs, chemicals, or food allergens, and is commonly associated with malignancies, connective tissue disorders, and hyperglobulinemic states. Our patient with cutaneous small vessel vasculitis had multiple signs of systemic infection, although cultures were persistently negative secondary to previous antibiotic use. Given our patient's bioprosthetic valve, it was felt that the most likely unifying diagnosis for an underlying etiology was a subacute bacterial endocarditis.