

IMAGING IN INTENSIVE CARE MEDICINE



Dark urine, hypotension and blood smear examination

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A 76-year-old woman was admitted to ICU for sepsis. Her medical history consisted of follicular lymphoma with bone marrow invasion diagnosed in 1999. She was treated with three courses of chemotherapy, and a splenectomy was performed in 2009. She reported a 3-day history of fever, asthenia and nausea. Dark urine (Fig. 1a) and jaundice revealed a hemolytic syndrome. Blood smear showed no schistocytes, but identified intracellular *Babesia* sp. (2.1% parasitemia) (Fig. 1b). The patient remembered a tick bite 2 weeks before. She was treated

with clindamycin and intra venous quinine for 2 days. Day 2 parasitemia at 0.9% allowed switching to oral atovaquone and azithromycine. *Babesia* is a tick-borne disease with inoculation of protozoan parasite *Babesia*. It mostly occurs among immunocompromized patients especially after splenectomy and presents with an acute hemolysis syndrome. Acute respiratory syndrome and disseminated intravascular coagulation are the more frequent complications leading to a mortality rate up to 40%.

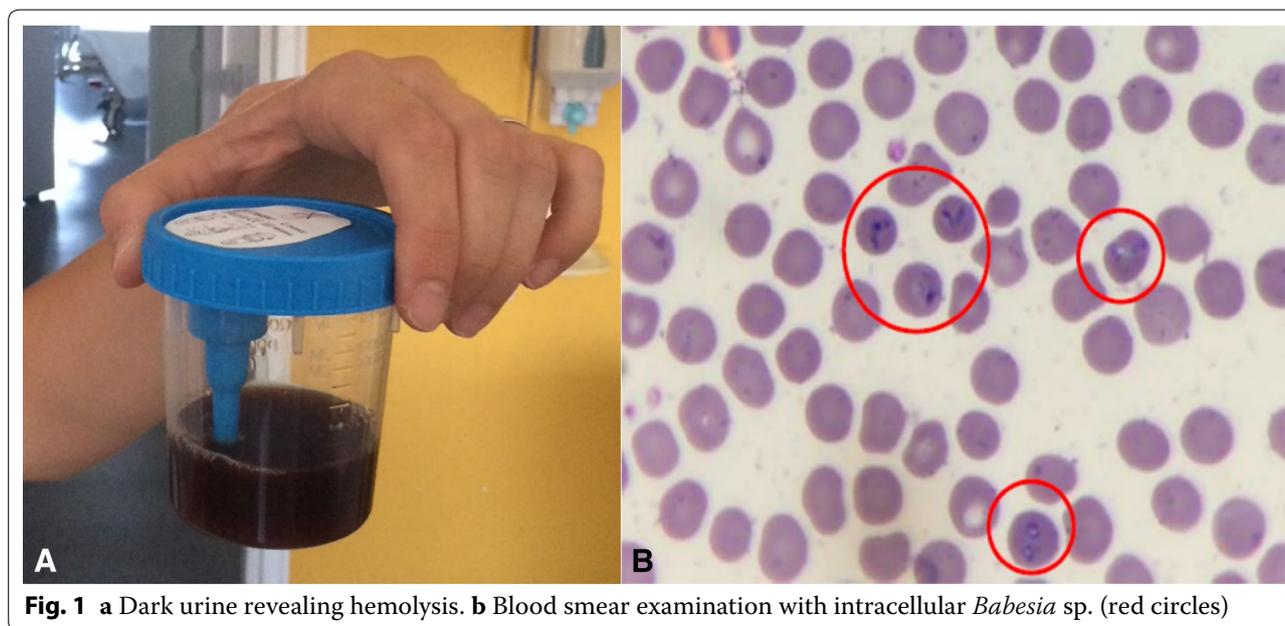


Fig. 1 a Dark urine revealing hemolysis. b Blood smear examination with intracellular *Babesia* sp. (red circles)

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Compliance with ethical standards**Conflicts of interest**

The authors declare that they have no conflict of interest.

Informed consent

Informed consent was obtained from the patient.

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