

# 24<sup>th</sup> Annual Resident Poster Day

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## What Happens in Burma Stays in Burma: A Case of Psoas Abscess Presenting a Diagnostic Challenge

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Crohn's disease is a systemic inflammatory disease characterized predominantly by gastrointestinal symptoms but also various extra-intestinal manifestations. This case highlights psoas abscesses as one such complication. Psoas abscesses are either primary, resulting from hematogenous or lymphatic spread, or secondary resulting from direct spread into the psoas muscle from adjacent structures including vertebrae, the gastrointestinal or genitourinary tract. Classically, psoas abscesses present with fever, back pain, and limp, as well as leukocytosis and elevated inflammatory markers. Diagnosis is confirmed with CT or MRI. Crohn's is the most common disease associated with secondary psoas abscesses. The organisms most often isolated include *S. Aureus*, *E. Coli*, *E. Faecalis* and *S. Viridans*. Our case demonstrates the non-specific nature in which psoas abscesses can present. This patient's travel history was initially a distracting element of his presentation and highlights the importance of broad differential diagnoses and avoiding anchoring on any single historical elements. The case serves as an important reminder to be mindful of extra-intestinal manifestations in Crohn's and to always consider psoas abscess in a patient with Crohn's disease who presents with hip pain or antalgic gait.