

Hepatic Abscesses in Diabetic Patients: About 16 Cases

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Introduction :

Hepatic abscess is a preferred septic site in diabetes mellitus, particularly in the elderly.

Objectives:

The aim of our work is to describe the epidemiological, biological, radiological and therapeutic aspects of liver abscesses in diabetics.

Methods:

Retrospective study, initiated in the emergency and visceral surgery departments of the CHU Mohamed VI in Marrakesh, over a 5-year period.

Results:

We identified 16 patients with an average age of 60.9 years. 13% had biliary lithiasis; 95% were type 2 diabetics, insulin-treated in 43% of cases; 6.25% had gestational diabetes. Average diabetes duration: 6.4 years; 75% had diabetic ketosis. 60% had fever, 75% had right hypochondrium pain.

The average of CRP: 241mg/L, hyperleukocytosis ranging from 15,000 to 27,000 elements/m³, abscesses reaching several segments in 62.5% of cases. Patients were put on triple antibiotic therapy (ceftriaxone, gentamicin, metronidazol) in 75%, bi-antibiotherapy (ceftriaxone - metronidazol) in 25%, as well as surgical drainage in 25%, and intensified insulin therapy in the majority of cases. The evolution was favorable in 69% of cases, unfavorable in 31%.

Conclusion :

Hepatic abscesses are a relatively rare pathology, but their prevalence is increasing. Diabetes favors immunodepression. The pauci-symptomatic nature of hepatic abscesses in diabetics means that they should be investigated in the event of unexplained fever or infectious syndrome, like any other deep suppuration, using imaging techniques, in particular ultrasound and CT scan. Treatment is dominated by antibiotic therapy and radiological drainage, and the prognosis has improved.

Keywords :

Hepatic Abscess, diabetes mellitus, retrospective study.