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Title: Uncommon cause of fever in a child with steroid-dependent nephrotic syndrome

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Background: Pediatric cases of nephrotic syndrome are vulnerable to developing infections due to conditions of relative malnourishment, overall immunodeficiency, and use of immunosuppression.

Case characteristics: Here, we report the case of a 3-year-old child with steroid-dependent nephrotic syndrome, who presented to the clinic with high fever of unknown origin.

Observation and Outcome: The patient was found to have an atypical mixed infection with mycoplasma and cytomegalovirus based on a computed tomography scan of the chest and abdomen and raised IgG and IgM antibody titers. The infection completely resolved with appropriate treatment and lowering of immunosuppression.

Message: Persistently febrile pediatric patients, especially in the setting of recent immunosuppression and absence of otherwise-identified infectious pathogens, are at risk and should be screened for atypical mixed infections.