Preseptal Cellulitis In A Neonate
Maha Oudrhiri and Amina Barkat

1Department of Medicine and Neonatal Resuscitation, National Center for Neonatology and Nutrition, Rabat, Morocco
2Faculty of Medicine and Pharmacy of Rabat, Morocco

Figure 1: (A): Bilateral orbital inflammatory edema; (B): CT scan showed bilateral Preseptal cellulitis; (C): Favorable evolution of cellulite with regression of edema.

Keywords:
Ocular; Edema; Microbiological

Clinical Image
A 7-day-old boy infant was admitted with bilateral orbital inflammatory edema with purulent ocular secretions. On examination, the infant was afebrile and no signs or symptoms of systemic involvement were found. The baby had an uneventful full term normal vaginal delivery with birth weight of 3 kg and no significant past medical history. On investigations, white blood cell count was increased to 26,200 cells/mm³ with neutrophil predominance of 73%, C-reactive protein levels of 100 mg/L and Cerebrospinal fluid culture was sterile. CT scan of the head and orbit showed bilateral Preseptal cellulitis: stage I of Chandler’s classification. Empirical therapy with intravenous ceftriaxone and vancomycin were started. Microbiological investigation of both conjunctival swabs grew Staph aureus. Eyelid edema subsided fully after 10 days of treatment with full and free movement of eyeball in all directions of gaze.

*Corresponding author: Maha Oudrhiri, Resident at Department of Medicine and Neonatal Resuscitation, National Center for Neonatology and Nutrition, Rabat, Morocco, Tel No: +212-661654515; E-mail: maha.oudrhiri@gmail.com

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