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Invasive *Streptococcus pyogenes* infection

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Whenever *Streptococcus pyogenes* infection comes into attention, most people would simply think of strep pharyngitis, what they used to call for a long time a “strep throat”. In few other occasions, this might indicate a localized skin infection that has been traditionally treated with a few-day course of antibiotics. Unfortunately, this is not always the case. Invasive streptococcal infection has been increasingly reported in the recent years. The spectrum of the disease ranges from soft tissue infection to severe sepsis, toxic shock syndrome and even death. Not uncommon, post streptococcal sequelae have been irreversible and led to permanent disabilities even when the best antibiotics have been used. The strain characteristics and the genetic profiles of the isolates, the so called “super antigens” are responsible for the different clinical presentations and most importantly the seriousness of the disease. We here present a case of an 11 year old healthy girl who developed severe streptococcal sepsis that was complicated with toxic shock syndrome, multi-organ dysfunction and purpura fulminans. Over the course of her illness, she developed cardiac asystole and sever vascular compromise that have unfortunately led to the amputation of two limbs. And yet she had to undergo a long-term rehabilitation program that could last for years.

Biography

Al dubisi Fatimah has completed her Pediatric Infectious Board Certificate in Saudi Arabia 2014, She used to work as a Staff in the Division of Infectious Diseases and later as a Director of Infection Control Division in the Minsitry of Health, Saudi Arabia 2014-15. Currently she is doing an extensive work on infectious diseases at the Hospital of Sick Childen, University of Toronto since 2016 with extra focus on tuberculosis. She has couple of case reports and a published study about *Clostridium difficile*. She is currently working on some reasearch projects in the tuberculosis and antibiotic stewardship

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