
Sternoclavicular Septic Arthritis as First Manifestation of Brucellosis

Surgical localisation of infection caused by Brucella varies from 10 to 60% of cases [1-3]. The sacroiliac joint is most frequently affected, followed by the lumbar column, and large peripheral joints.

We have seen a patient with brucellosis presenting as sternoclavicular arthritis, a site that is rarely described.

A 54-year-old cattle reiser presented with a mass at the right sternoclavicular joint, associated with fever, chills and sweating for 3 weeks. He did not have any important medical history. His ESR was 42 mm/h with normal WBC and urine but mild liver dysfunction. Chest radiography and tomography of the sternoclavicular joint were normal and aspiration of the swelling did not give any results. However, the Rose Bengal test was positive, and oral treatment with rifampicin, 1200 mg/day and doxycycline, 200 mg/day was started. Agglutinations to Brucella were positive at 1:1250. Ten days after admission, Brucella melitensis grew from initial blood cultures. Forty-eight hours after admission, the patient was afebrile but with some signs of inflammation of his right wrist and left ankle. Marked uptake in the right sternoclavicular joint was observed on bone scans. Other areas with less intensity were apparent in the wrist and ankle. The bi-dimensional echocardiogram was normal.

The swelling in the joint increased despite antibiotics and surgical drainage was performed with abundant egress of pus. Brucella melitensis was isolated in the material obtained. The patient was maintained on rifampicin for 6 weeks and doxycycline for 6 months. The patient was asymptomatic 2 months after beginning treatment.

Sternoclavicular septic arthritis is a well-known complication in drug addicts; patients with catheters in the subclavian vein; patients with rheumatic disorders and subjects on dialysis [5-1]. Generally, Brucella melitensis or Staphylococcus aureus are the responsible bacteria, and the mechanism of spread is haematogenous or by contiguity. Brucellosis is a multisystemic disease which very frequently presents as arthralgias, arthritis and osteomyelitis [4]. Septic arthritis of the big peripheral joints is the least common joint manifestation [1]. However, sternoclavicular involvement is rare and we have found only one previously reported case [12]. Our experience suggests that surgical drainage is required for adequate treatment of the arthritis at this site.

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