

Wegener's Granulomatosis Precipitated by Prostatic Abscess.

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Published In/Presented At

Khawaja, S. Jain, D. Firak, G. Ross, J. (2017, April 27). *Wegener's Granulomatosis Precipitated by Prostatic Abscess*. Poster Presented at: MEDnet POMA, King of Prussia, PA.

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Wegener's Granulomatosis Precipitated by Prostatic Abscess

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Introduction

Granulomatosis With Polyangiitis (GPA), formerly known as Wegener's granulomatosis, typically presents as necrotizing granulomatous inflammation frequently involving the upper and lower respiratory tracts and the renal system. While etiology of this disease is likely multifactorial, infections have been postulated to precipitate autoimmune phenomenon such as GPA.

Methods

We report a case of a 71-year-old male with newly diagnosed benign prostatic hyperplasia managed with a foley catheter who presented in renal failure secondary to a prostate abscess. Patient underwent aggressive urological treatment with nephrostomy tube placement and CT guided drainage of the abscess in addition to broad spectrum antibiotic administration. Repeat imaging revealed a persistent prostatic fluid collection which prompted a suprapubic prostatectomy followed by prolonged course of antibiotics. Pulmonary lesions were incidentally noted on imaging requiring further work up.

Results

Lung biopsy revealed granulomatous inflammation. A positive PR3-ANCA, sinus involvement appreciated on cranial imaging, as well as cutaneous nodules affirmed the diagnosis of GPA. Treatment was initiated with steroids, plasmapheresis and rituximab. Unfortunately, the patient continued to decompensate with worsening renal and respiratory status eventually requiring hemodialysis and ventilator support. Ultimately, the patient was transitioned to comfort care and died.

Conclusion

While the pathogenesis of ANCA associated vasculitis remains to be elucidated, some argue that infection may play a role in the induction of autoimmunity. The literature contains anecdotal evidence of association between GPA and abscess formation in breast, spleen and parotid gland. In conclusion, this case emphasizes the theory of molecular mimicry and its association with autoimmune diseases.

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