

**RF2 Clostridium septicum Aortitis: Report of Two Cases and Review of the Literature**

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Clostridium septicum aortitis is a rare infection that has a strong association with occult colonic malignancy. We report the 25th and 26th cases of C. septicum aortitis in the English literature and make recommendations for its management. The first patient was a 75 year old male who presented with nausea, vomiting, and diffuse abdominal pain. Computed tomography (CT) revealed periaortic gas and aortic wall emphysema extending from the celiac axis to the aortic bifurcation. He was taken to the operating room where a colonic tumor with retroperitoneal perforation was found. The retroperitoneum was densely fibrotic, but the aorta was intact without purulence. Therefore, a right hemicolectomy was performed. Blood cultures eventually revealed C. septicum. On post-operative day 10, the patient became hypotensive, his hemoglobin dropped from 9.0 g/dL to 6.3 g/dL, and repeat CT scan revealed a new 5.5 X 4.8 cm sacular infrarenal aortic aneurysm. The patient underwent emergent aortic ligation, retroperitoneal debridement, and right axillobifemoral bypass. One month after discharge, he was readmitted with lethargy and found to have gas surrounding the remainder of his abdominal aorta consistent with recurrent C. septicum aortitis. The patient expired within 48 hours of admission. The second patient was a 76 year old female who presented with a 3 week history of diffuse abdominal pain. CT scan demonstrated a 5 cm abdominal aortic aneurysm with surrounding retroperitoneal gas. She was taken emergently to the operating room where her aorta was found to be ruptured at the level of the left renal artery. The aorta was resected and an extensive retroperitoneal debridement was performed. Upon exiting the abdomen, a liver nodule was biopsied that eventually revealed metastatic adenocarcinoma. A right axillobifemoral bypass was performed. Her blood cultures grew C. septicum. She had a prolonged post-operative course, including reoperation for bowel obstruction secondary to a cecal tumor, and she expired on hospital day 94. C. septicum aortitis is a lethal disease that necessitates prompt surgical intervention and appropriate antibiotic therapy. The strong association of C. septicum with occult malignancy should prompt the astute clinician to undertake an exhaustive search for a neoplastic process.