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CASE REPORT

Mpox and Chicken Pox Coinfection Complicated by Acute Urinary Retention: A Case Report

*Coinfection par la Variole et la Varicelle Complicquée par une Rétention Urinaire Aiguë :
Un Rapport de Cas*

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ABSTRACT

INTRODUCTION: Mpox and Chicken pox have similar presentations, sometimes causing a diagnostic dilemma. Reports have emerged of coinfections, mostly in the central African region.

CASE REPORT: Index patient is a 23-year-old female who presented with a 2-week history of exanthematous vesiculopustular rashes which started from her genital and groin area with accompanying vulvar swelling. It was then followed by other similar rashes involving mainly her face and limbs with some on her trunk. There was also an associated high grade continuous fever. Rashes were painful and itchy with associated cervical and axillary lymphadenopathy. Following admission, patient had increasing dysuria with accompanying acute urinary retention due to the discomfort accompanying micturition which was relieved by urethral catheterization and resolved with intravenous infusion and parenteral empirical antibiotics for superimposed bacterial infection. Polymerase chain reaction from her skin lesion sample was positive for both monkey pox and chicken pox. She was also given a course of acyclovir and made an uneventful recovery after 12 days of admission and was discharged.

CONCLUSION: We report a rare manifestation of acute urinary retention in a HIV-negative female patient with Mpox and chicken pox co-infection. **WAJM 2023; 40(8): 873–876.**

Keywords: Mpox, Chicken pox, Nigeria, Outbreak, Urinary retention, Lymphadenopathy.

RÉSUMÉ

INTRODUCTION: La variole du singe et la varicelle ont des présentations similaires, ce qui pose parfois un dilemme diagnostique. Des cas de coinfection ont été signalés, principalement dans la région de l'Afrique centrale.

RAPPORT DE CAS: La patiente de référence est une femme de 23 ans qui a présenté pendant deux semaines des éruptions vésiculo-pustuleuses exanthémateuses qui ont commencé dans la région génitale et l'aîne, accompagnées d'un gonflement de la vulve. D'autres éruptions similaires ont suivi, touchant principalement le visage et les membres, mais aussi le tronc. Une fièvre élevée et continue a également été associée à ces éruptions. Les éruptions étaient douloureuses et prurigineuses, avec une lymphadénopathie cervicale et axillaire associée. Après son admission, la patiente a présenté une dysurie croissante accompagnée d'une rétention urinaire aiguë due à l'inconfort de la miction, qui a été soulagée par un cathétérisme urétral et résolue par une perfusion intraveineuse et une antibiothérapie parentérale empirique pour une infection bactérienne superposée. La réaction en chaîne de la polymérase à partir de l'échantillon de sa lésion cutanée était positive pour la variole du singe et la varicelle. Elle a également reçu un traitement à l'acyclovir et s'est rétablie sans incident après 12 jours d'admission et a été autorisée à sortir.

CONCLUSION: Nous rapportons une manifestation rare de rétention urinaire aiguë chez une femme séronégative atteinte d'une co-infection par la variole du singe et la varicelle. **WAJM 2023; 40(8): 873–876.**

Mots-clés: Mpox, Varicelle, Nigeria, Épidémie, Rétention urinaire, Lymphadénopathie.

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Abbreviations: DRC, Democratic Republic of Congo; HIV, Human Immunodeficiency Virus; WHO, World Health Organization.