Multiple ecchymotic signs in acute pancreatitis

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DESCRIPTION

A 37-year-old plumber was admitted with acute abdominal pain of 4 days' duration that was associated with nausea, vomiting and constipation. He had consumed ~120 g ethanol/day for the last 7 years and had been admitted for alcohol withdrawal syndrome 5 months ago. On examination in the emergency department, he had tachycardia (120 beats/min), normal blood pressure (110/80 mm Hg) and tachypnoea (24 breaths/min). His abdomen was distended with ecchymotic discoloration of his left flank, lateral upper one-third of left thigh, the right inguinoscrotal area and bilateral calves (figure 1). Lipase was 391 U/L (<60) and contrast-enhanced CT of the abdomen revealed oedematous pancreas, peripancreatic fluid collection and mild ascites leading to a diagnosis of moderately severe pancreatitis. His other investigations were as follows: prothrombin time prolongation 7 s, international normalised ratio 1.4, platelet count $1.73 \times 10^9/L$ ($150-450 \times 10^9/L$), fibrinogen 228 mg/dL (200–400), total bilirubin 2.3 mg/dL, aspartate transaminase 64 U/L and alanine transaminase 47 U/L and discriminant function of 34.1. Testing for activated partial thromboplastin time and D-dimer was unavailable in our institution at that point of time.

Figure 1 The ecchymotic eponyms: Grey Turner sign (lateral abdominal wall), Fox sign (lateral thigh discoloration) and Stabler sign (inguinal pubic region).

Patient's perspective

The doctors gave me a guarded prognosis in view of these red patches on the body, but I am so much relieved after the stay in hospital without developing a difficult-to-treat complication.

Learning points

- ▶ Abdominal ecchymotic signs do not always indicate internal haemorrhage.
- ▶ Multiple ecchymotic signs in pancreatitis appear to be uncommon.
- ▶ Eponyms help recollect infrequently observed signs and their associated disorders.

He was treated symptomatically with tramadol, pantoprazole, vitamin B₁₂, thiamine and intravenous fluids. He was able to tolerate oral fluids on day 3. By the seventh day, his ecchymotic patches began gradually fading and he was discharged on the ninth day of admission.

Ecchymotic eponyms involving the abdomen and groin include Cullen sign (periumbilical discoloration), Grey Turner sign (lateral abdominal wall), Stabler sign (inguinal pubic region), seatbelt sign and the Blue scrotum of Bryant.¹ Fox sign indicates lateral thigh discoloration. These signs are usually indicative of a surgical or obstetric emergency such as a perforated duodenal ulcer or ruptured ectopic pregnancy. Our patient had three of these ecchymotic eponyms due to a medical disorder that was treated conservatively.

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