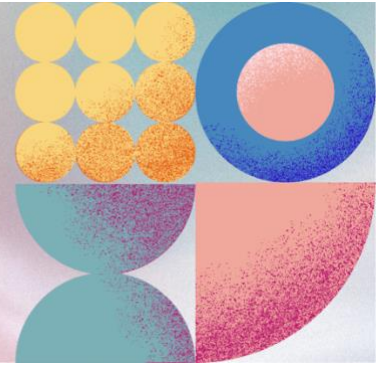


A Case of Fitz-Hugh-Curtis Syndrome: An Atypical Presentation of Pelvic Inflammatory Disease (PID)

Vanessa Fowosere (B. Med) | Women's & Children's Services, Western Health, Melbourne Victoria



BACKGROUND

Fitz-Hugh-Curtis Syndrome (FHCS) is an atypical manifestation of PID characterised by inflammation of the liver capsule. Its diagnosis can be challenging given the range of differentials for right upper quadrant (RUQ) abdominal pain.¹

AIMS

This case aims to highlight the atypical manifestation of PID – Fitz-Hugh-Curtis Syndrome.

CASE

A 20-year-old female presented to ED with a 1-day history of severe RUQ abdominal and shoulder tip pain. Her initial work-up showed: CRP 84, Hb 130 WCC 10.1, negative BHCG, normal lipase/LFTs/renal function and pelvic US demonstrated haemorrhagic right complex corpus luteum (CL). She denied vaginal discharge or bleeding and had no prior history of sexually transmitted infections but was noted to have white per-vaginal discharge on speculum examination.

RESULTS

The patient was initially admitted for observation and analgesia for the haemorrhagic CL with no explanation for RUQ abdominal pain until the endocervical swabs taken on admission returned positive for chlamydia. Her CRP rose to 102 and AST became mildly deranged at 33. She was concurrently diagnosed with FHCS secondary to PID and was commenced on IV antibiotics with improvement in her pain and inflammatory markers. She was discharged with oral antibiotics, a plan for follow-up pelvic US to assess for resolution of the haemorrhagic CL versus ?tubo-ovarian abscess now given the context and outpatient follow-up.

DISCUSSION

The management of FHCS is the management of PID with 75% of cases resolving after antibiotics alone. It is an important syndrome to recognise given the long-term sequelae of PID, including infertility and chronic pelvic pain.¹

Reference

1. Asit H, Pop A, Malik A, et al. Fitz-Hugh-Curtis Syndrome. StatPearls [Internet]. 2023 July 3 [cited 2024 February 18]. Available from <https://www.ncbi.nlm.nih.gov/books/NBK499950/>