

## 메트로니다졸에 의해 유발된 객혈을 동반한 혈전성 혈소판감소성 자반증 1예

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### A Case of Hemoptysis Combined with Thrombotic Thrombocytopenic Purpura Possibly Associated with Metronidazole

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Thrombotic thrombocytopenic purpura (TTP) is a rare disorder of the blood coagulation system and has the characteristic set of clinical and laboratory findings including microangiopathic hemolytic anemia, thrombocytopenia, purpura, acute renal insufficiency, neurologic abnormalities, fever. But severe bleeding induced by TTP is rare. We describe a 46 years old female with hemoptysis associated with TTP.

A 46 year old woman have been founded hemorrhagic ovarian cyst under medication examination. She had an operation for complicated ovarian cyst with laparoscopy. She was treated with cefpiramide, amikacin, metronidazole for 3 days. Three days later, she was referred to the emergency department for dyspnea and anuria for 2 days. She was confused. Laboratory findings revealed anemia, thrombocytopenia, hyperbilirubinemia, azotemia and elevated LDH level. Pheripheral blood smear showed some schistocytes. Under diagnosis of TTP she was treated with hemodialysis and plamapheresis. She had no other causes of TTP so we assumed that a relationship exists between metronidazole and TTP. At hospital day 2 she spat hemoptysis and chest X ray was more worse. Bronchoscopy and chest CT showed diffuse alveolar hemorrhage. She was treated with methylpredinosolne combined with plamapheresis. Renal biopsy showed the presence of focal subendothelial fluffing in GBM, the possibility of thrombotic microangiopahty. At the present time, she was successfully fully recovered renal function and pulmonary hemorrhage.

**Key Words** : 혈전성 혈소판감소성 자반증, 용혈성 요독 증후군, 메트로니다졸  
TTP, HUS, Metronidazole