



# Human brucellosis: disease of thousand faces

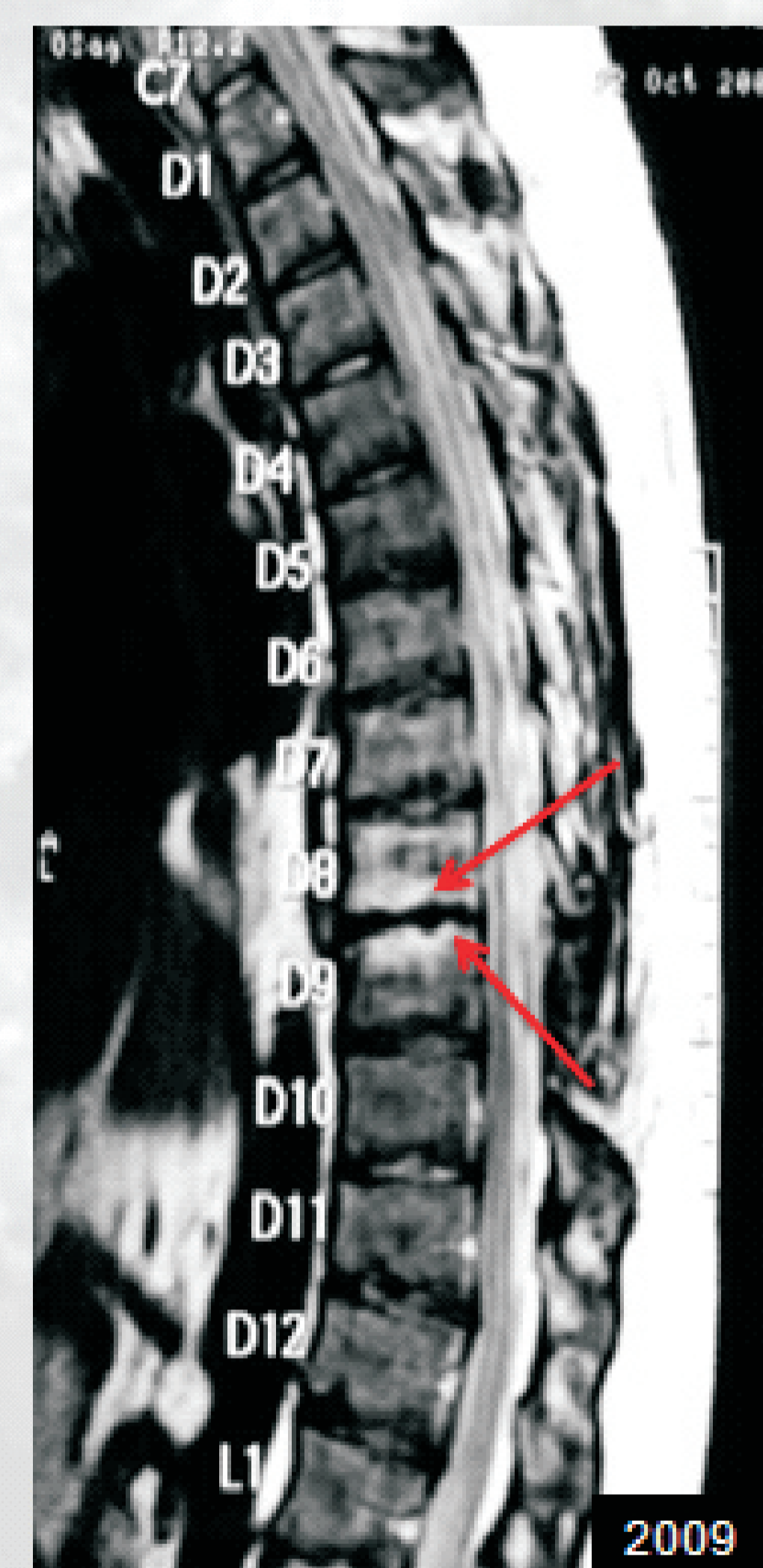
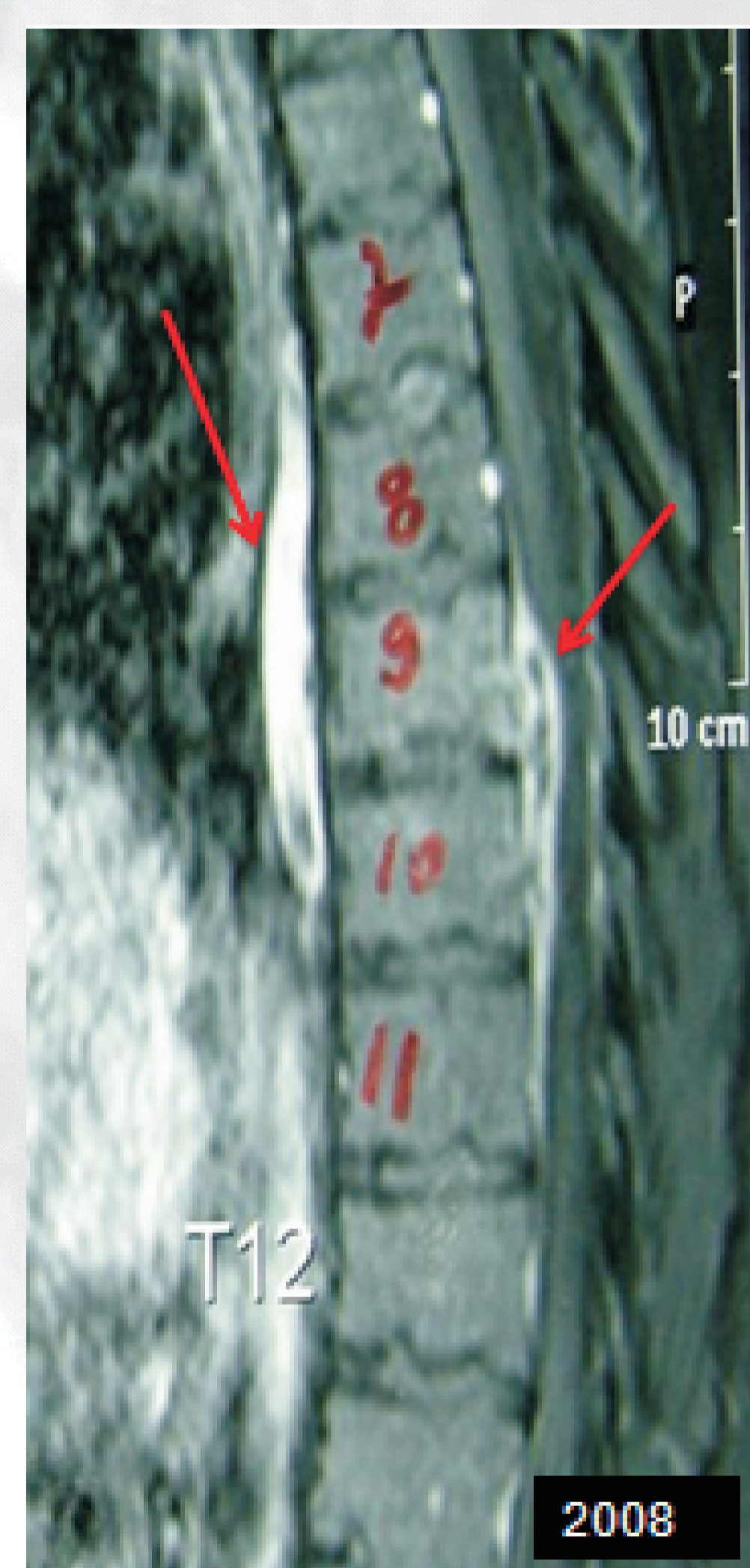
Silva, Marcos Vinicius da (coordinator of the clinic of Zoonoses and Tropical Medicine, Institute of Infectious Diseases Emílio Ribas, Director Scientific of the Institute of Infectious Diseases Emílio Ribas, Associate Professor, School of Medicine, PUC - São Paulo, Brazil)

## Introduction

The human brucellosis is a disease with clinical manifestations of broad spectrum, polymorphic, with difficult clinical and laboratory diagnosis. The treatment is also difficult requiring associations of antibiotics for prolonged period of time and a long follow up outpatient, recurrences occur in about 5% to 23%, usually within the first six months after treatment, but also over longer periods. The purpose of this is to report the different clinical manifestations and epidemiological history of patients at Emílio Ribas Institute of Infectious Diseases, featuring four selected clinical cases

## Clinical Cases

A pharmacy clerk patient, with no epidemiological history of the disease, with prolonged fever, progressing to sepsis and splenic abscess of 2.5 cm, whose diagnosis was made by serological test, had relapse after inicial treatment with doxycycline and rifampin for 6 weeks, required new treatment for 6 months



A storekeeper patient, who returned from a trip in the region of Trás os Montes - Portugal, where he ate home made goat cheese, presented fever, accompanied by night sweats, malaise and weight loss, with isolation of *Brucella melitensis* in three blood cultures. Treated with doxycycline and rifampin for 6 weeks

A veterinarian patient, who had prolonged fever for 3 months, progressing to perivertebral and spinal canal abscess formation, affecting the vertebrae T7 to T12, with serological and anatomopathologic diagnosis. Treated with doxycycline for 6 weeks and gentamicin for 7 days, he has followed by 3 years, with persistent changes in transaminases when PCR was carried out in the urine, positive twice and negative urucultura, required new treatment for 6 weeks



An agronomist patient, who accidentally injected himself during vaccination with the bovine B19 vaccine, developed a significant lesion at the inoculation site, fever, sleep disorders, drowsiness, irritability and night sweats, with serological diagnosis. Treated with doxycycline and rifampin for 6 weeks

## Conclusion

With these 4 cases we report the different clinical and epidemiological history of human brucellosis treated in the outpatient in the Clinic for Tropical Diseases and Zoonosis, in the Institute of Infectious Diseases Emílio Ribas, São Paulo, Brazil

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