CLINICAL SNAPSHOT

Very Severe Secondary Sclerosing Cholangitis as a Sequela of Influenza

Figures: a) normal ERCP findings in another patient; b) rarefied biliary pathways in this patient.

In November 2015, this previously healthy 51-year-old man became ill with an infectious disease with high fever, which was diagnosed as an influenza A infection. He developed very severe influenza pneumonia and was treated with extracorporeal oxygenation for several weeks. Multiple episodes of sepsis ensued, mostly with a pulmonary focus of infection. He even underwent open-heart surgery after transesophageal echocardiography yielded findings that were suspect for endocarditis, but no vegetations were found. During the patient's months of treatment in the intensive care unit, he developed a severe

secondary sclerosing cholangitis due to ischemia. He received a liver transplant in July 2016. Despite ongoing intensive care, multiple further episodes of sepsis led to his death two months later. This case illustrates the entity of secondary sclerosing cholangitis and underscores the fact that influenza can be a life-threatening illness even for persons who are not at especially high risk.

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Conflict of interest statement

The authors state that they have no conflict of interest.

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