



Grey turner's sign in a patient with wallenberg syndrome

Mohammad Reza Mousavi; Erfan Taherifard*

Shiraz University of Medical Sciences, Shiraz, Fars, Iran

***Corresponding Author(s): Erfan Taherifard**

Shiraz University of Medical Sciences, Shiraz, Fars, Iran

Tel: 98-91-7281-0165;

Email: erfantaherifard@gmail.com

Received: Mar 04, 2020

Accepted: Apr 03, 2020

Published Online: Apr 07, 2020

Journal: Journal of Clinical Images

Publisher: MedDocs Publishers LLC

Online edition: <http://meddocsonline.org/>

Copyright: © Taherifard E (2020). *This Article is distributed under the terms of Creative Commons Attribution 4.0 International License*

Keywords: Hemorrhage/diagnosis; Ecchymosis/etiology; Retroperitoneal Space

Clinical image description

A 69-year-old man known case of diabetes mellitus, hypertension and chronic kidney disease presented to the hospital emergency with dizziness and slurred speech. The patient undergone brain computed tomography and lateral medullary infarction was revealed in the imaging. Thereafter, the patient was on dual antiplatelet therapy with aspirin and clopidogrel. After 7 days of treatment patient developed severe intractable vomiting. Besides, patient hemoglobin level started a descending pattern from 12.7 to 8.1 during 2 days. Several workups including coombs test was done for the patient, but the source for

this hemoglobin drop remained unknown. After 5 days, his new extern assessing the patient for the first time noticed diffuse ecchymosis on patient's bilateral flanks (Figure 1) and suspicion for a retroperitoneal source of bleeding was raised. As the patient had high levels of creatinine [3,4], an abdominopelvic computed tomography without contrast was conducted for the patient and confirmed the suspicion. The imaging revealed that there is fat stranding in the retroperitoneal portion of pelvic cavity and abdomen suggestive of retroperitoneal hemorrhage. Furthermore, there was hyperdensity between muscle fibers of



Cite this article: Mousavi MR, Taherifard E. Grey turner's sign in a patient with wallenberg syndrome. J Clin Images. 2020; 3(1): 1031.

both psoas muscle (about 130x50mm in the left side and about 170x60mm in the right side) in favor of hemorrhage in the both muscles. Grey Turner's sign is rather a rare manifestation which refers to ecchymosis and bruising of the flanks which develop especially in patients with a retroperitoneal hemorrhage [1]. In our patient, there is no history of recent trauma. A combination of intractable vomiting, antiplatelet therapy and underlying diseases of diabetes and hypertension could be responsible for this hemorrhage.

References

1. Rastogi V, Singh D, Tekiner H, Ye F, Mazza JJ, et al. Abdominal Physical Signs of Inspection and Medical Eponyms. *Clin Med Res.* 2019; 17: 115-126.



Figure 1: Ecchymosis on the patient's flank