A Gallium Scintigraphy of Fever of Unknown Origin

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Figure 1. Gallium scintigraphy showed the accumulation of the enlarged appendix.

A 70-year-old woman presented with a 5-day history of spiking fever (37.2-39.8°C). She had a 20-year history of severe depression. There was no history of abdominal pain. She had initially consulted a local doctor and was treated with ceftriaxone sodium (1 g/day) intravenously for 3 days, but the fever persisted. Her white blood cell count was 18,000/μl and her serum C-reactive protein level was 3.6 mg/dl (normal range <0.3). Chest and abdominal radiography and computed tomography were normal. Gallium scintigraphy showed the accumulation of the enlarged appendix (Fig. 1, arrow).

Although most patients with appendicitis complain of marked abdominal pain, deeply depressed patients sometimes present with only fever, as in this case. The short length of time and the low dose of intravenous antibiotics might have played a role in the relatively stable condition of this patient, who did not have sepsis. This is a typical and interesting example of the use of gallium scintigraphy to identify infection of unknown origin.