Fulminant Pneumonia Caused by Nontypable *Haemophilus Influenzae*

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Picture.

A 75-year-old previously healthy woman was transferred to our hospital with acute onset dyspnea. Chest radiography revealed the presence of diffuse bilateral infiltrates (Picture), and the laboratory data revealed signs of acute inflammation (white blood cell count: 4,000 cells/mL, C-reactive protein: 13.8 mg/dL and procalcitonin: 3.44 ng/mL). She was therefore intubated for severe respiratory failure, and broad-

spectrum antibiotics were immediately administered. Despite receiving intensive care, the patient died the next day. *Haemophilus influenzae* was later isolated in both the sputum sample and two sets of blood cultures that were obtained upon admission. The serotype of the strain that was obtained from the blood culture was identified using a Denka Seiken Agglutinating Sera kit, an *H. influenzae* type a-f kit (Denka Seiken Co., Ltd., Tokyo, Japan) and an *H. influenzae*-specific bexA, bexB and pepN polymerase chain reaction (1). The strain was subsequently confirmed to be nontypable *H. influenzae*. Clinicians should therefore be aware of this fatal infection in this era of *H. influenzae* type b conjugate vaccines (2).

The authors state that they have no Conflict of Interest (COI).

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