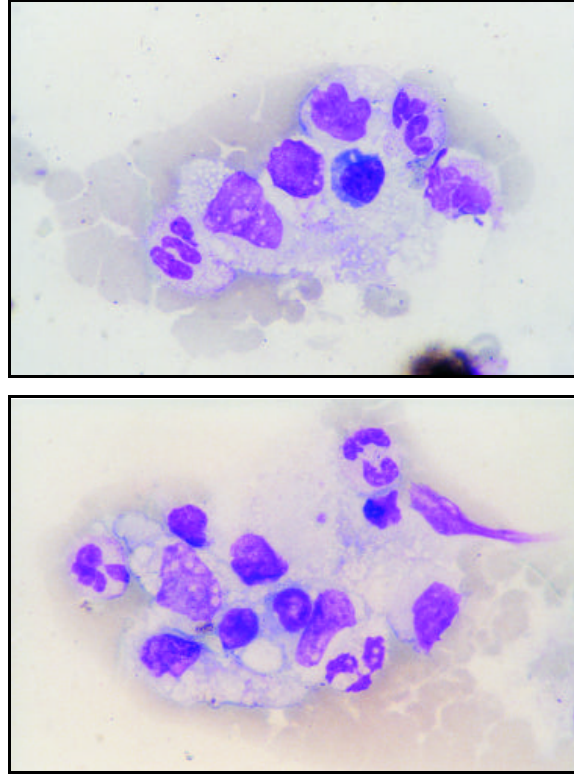
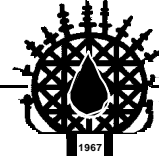


Images in Haematology

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A 45 year old female patient presented with left hemiparesis and she was treated due to cerebral infarction. She had fever on the 6th day of admission to the hospital. While complete blood count was in normal range at the beginning of the therapy. Hb, leukocyte and platelet counts showed rapid decrement between 8th to 10th days of treatment (Hb: 8 g/dl, WBC: $1.2 \times 10^9/L$ and platelet count: $15 \times 10^9/L$). Bone marrow aspiration was normocellular and increase in histiocytes and signs of hemophagocytosis were determined. Peripheral smear revealed relative lymphomonocytosis. Increment in macrophage activation and phagocytosis of the other blood elements by these cells were also detected in peripheral smear (Figure 1,2). *Enterobacter cloacae* was isolated in the blood culture. Findings of the bone marrow and peripheral smear returned to normal on the 10th day of appropriate antibiotic treatment. This patient was presented because hemophagocytosis is rare in peripheral smear.

Bülent ESER*, Ali ÜNAL*, İlgin SOYUER,
Özlem ER***

* Department of Hematology and Oncology,
Erciyes University Medical Faculty,

** Department of Pathology, Erciyes University
Medical Faculty, Kayseri, TURKEY