

Joseph R. Shiber, MD
S. Lamont Wooten, MD

From the Brody School of Medicine, East Carolina University (Shiber), and Orthopedics East (Wooten), Greenville, NC.

0196-0644/\$-see front matter

Copyright © 2007 by the American College of Emergency Physicians.

doi:10.1016/j.annemergmed.2007.04.020



Figure 1. Left hand index finger with large pustules on the finger pad and the second pustule at the metacarpal base.



Figure 2. Right hand middle and ring finger with areas of necrosis. Used with permission of Joseph Shiber, MD, Brody School of Medicine, East Carolina University, Greenville, NC.

[Ann Emerg Med. 2007;50:740.]

A 19-year-old previously healthy man complained of a sore throat for 5 days, accompanied by fever and chills. He then developed pain and swelling in his left knee and thigh. On the day before his presentation, he noticed pain and discoloration of 2 fingertips on his right hand. Our evaluation revealed a tense and indurated left thigh and knee. A large pustule was present on his left index finger pad, with small lesions at the base (Figure 1). His right middle and ring finger pads had areas of frank necrosis (Figure 2). He was taken to the operating room for drainage and irrigation of his knee, fasciotomies of his thigh, and debridement of his fingers.

For the diagnosis and teaching points, see page 748.

To view the entire collection of Images in Emergency Medicine, visit www.annemergmed.com

reference material rigorously organized by name, common names, description, distribution, toxic part, clinical findings, management, and references. This section will appeal to clinicians as a reference and to anyone fascinated by plants and their toxicology as an enjoyable read.

What if the patient presents with a seizure without knowledge of the plant? Management is simplified by use of Section 2, "Poisons, Poisoning Syndromes, and Their Clinical Management." In this section you would find that practical management recommendations are readily available, and this easily accessible reference helps demystify the clinical problem.

It is somewhat disappointing that the authors chose to eliminate mushrooms and fungi from this edition of the book, but they are botanically correct to keep them outside a plant

book and suggest a number of thorough references on this as a separate topic.

As always, it is the emergency physician who is often present when the question is asked by a particular patient with a particular plant: "Is this poisonous?" The typical answer to that question is generally, "What is this?" and hence the need for a copy of this book in every emergency department.

*Richard J. Hamilton, MD
Drexel University College of Medicine
Philadelphia, PA*

doi:10.1016/j.annemergmed.2007.07.019

1. Youngken HW. Botany and medicine. *American Journal of Botany*. 1956;43:862-869.

IMAGES IN EMERGENCY MEDICINE

(continued from p. 740)

DIAGNOSIS:

Digital septic emboli. Cultures from his throat, blood, knee synovial fluid, fascia, and fingers all returned β -hemolytic group A streptococcus, identified as *Streptococcus pyogenes*. He was treated with intravenous penicillin and serial debridements of his thigh; after 1 month he was fully recovered.