## Death of a Girl Due to Meningitis with a History of One-Day Fever A Rare Presentation

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A 4-year-old previously healthy girl was taken to the nearest government hospital with oneday fever and vomiting. She was treated symptomatically at the OPD. Due to intractable vomiting she was again seen by a general practitioner. Oral rehydration solution was given. The worsening clinical condition warranted admission of the child to a tertiary care hospital the same night. Severe dehydration was noted and she developed several episodes of seizure. Active rehydration, seizure management and empirical IV antibiotic treatments were started. Series of biochemical tests were done including serum electrolytes. She gradually deteriorated and died on the following morning. No features of dehydration were demonstrable at the autopsy possibly due to rehydration attempts. The skin was devoid of petechiae or rash. Dissection of the cranial cavity revealed tensed dura. Superior sagittal sinus thrombosis was not evident. Features of severe cerebral congestion and oedema were noted with frank pus in the subarachnoid space. The CSF was turbid though subsequent cultures were devoid of growth. The right middle ear contained some fluid which was also sterile upon culture. In the respiratory system, tell-tale marks of vigorous resuscitative attempts were seen. Almost all organs had early features of sepsis. Postmortem blood culture isolated non-lactate fermenting coliforms whose significance is doubted. The cause of death was compiled as bacterial meningitis. In assessing small children with fever, more caution should be paid to perform a complete physical examination including the nervous system where special attention should be paid to neck stiffness etc.

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