## LOWER LIMB PAIN IN METHICILLIN-SUSCEPTIBLE STAPHYLOCCUS AUREUS INFECTION: THE LIMB INTRUDER

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**Introduction:** Staphylococcus aureus (S.aureus) is gram-positive bacteria mostly colonises human skin and mucosa and one of the commonest identified pathogen in infection. Methicillin-susceptible S.aureus (MSSA) usually causes a higher incidence of infection. Orthopaedic complication of MSSA usually begins with pyomyositis. Undiagnosed pyomyositis can be complicated by osteomyelitis, sepsis and muscle scarring. It has three stages: invasive stages that often being missed, suppurative stage and final stage which local and systemic manifestation are more prominent. The complications usually occur in muscle of spine and pelvic rather than lower limb.

**Results:** A 66-year-old male with no significant history of diabetes mellitus presented with swelling and pain over left lower limb for 3 months duration. Physical examination revealed that, patient was septic looking, tender and gross swelling of thigh and knee. Overlying skin was erythematous and warm. Septic parameters markedly increase. Plain radiograph showed acute osteomyelitis changes of femur shaft. Meanwhile, MRI scan of left lower limb revealed extensive intramuscular, multi-loculated collection of thigh extending to knee joint, the largest measuring 3.3 x 3.1 x 16.9cm. Thus, he was empirically started with iv gentamycin. He underwent incision and drainage, which drained 200cc pus from the several muscle compartments of thigh and knee. Blood and intra-operative tissue cultures grew MSSA Subsequently, he completed 6 weeks course of iv cloxacillin with complete resolution of the pathogen.

**Conclusion:** Despite orthophaedic complications of MSSA usually occur in muscle of spine and pelvic rather than lower limb. This case proved that musculoskeletal MSSA also can happen in lower limb aggressively. Thus. We recommend for early intervention of lower limb infection such are early initiation of methicillin-base antibiotic empirically. Besides that, MRI also highly recommended to assess the intracomparmental structure of the lower limb.