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Abstract (publication only)

**Two oropharyngeal tularemia cases with pregnancy**

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Introduction: Tularemia cases have been reported since 1930 in Turkey. Oropharyngeal tularemia is the most common type of the disease and transmission route is generally through contact with contaminated water. The number of human tularemia cases have increased over the past 20 years. Here we discuss two cases of pregnant women diagnosed and followed as oropharyngeal tularemia in our department. Cases: The first case was a twenty-three year old woman who applied to outpatient department. She was four weeks pregnant and complained of high fever, chills, malaise and swelling on neck for two months. In physical examination, the fever was 37.5 °C and oropharynx was hyperemic. There was a 2 x 1 cm size adenopathy on the right cervical region of the neck. The antibody against tularemia was detected as positive 1/320 dilution in micro-agglutination test. The patient did not accept gentamicin therapy. In the follow-up, adenopathy were distinctly decreased, body fever was getting normal and malaise was recovered. The patient and the baby were normal during and after delivery. The second case was a thirty-three year old woman who applied with high fever, throat pain, chills, malaise, myalgia, arthralgia and swelling on submandibular region of the neck for three days. She was 22 weeks pregnant. In physical examination the fever was 37°C. There was a 5x5 cm, tender and hyperemic adenopathy on right submandibular region. The antibody against tularemia was detected as positive 1/320 dilution in micro-agglutination test. The patient did not accept gentamicin therapy either. In the follow-up, adenopathy had suppurated spontaneously, and high fever and other complaints resolved after one month. After delivery the baby was also normal and the patient only had a small size adenopathy. Conclusion: There is no anti-microbial drug in group B to treat tularemia in pregnancy. Gentamicin is recommended by guidelines. World Health Organization also recommends gentamicin or ciprofloxacin. Our patients did not accept treatment. In conclusion, two cases of pregnant women with oropharyngeal tularemia recovered without specific therapy. The recovery of these two cases could have been due to the low virulence of *F. Tularensis* subspecies *holarctica* which is common in Turkey.