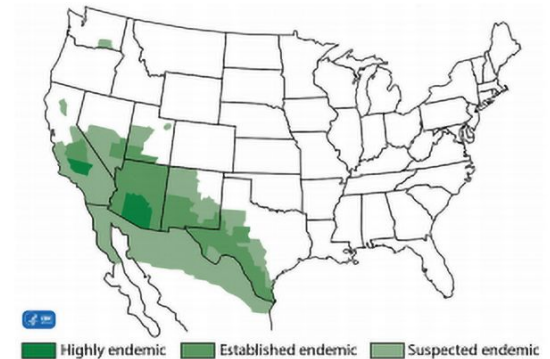


Spinal Coccidioidomycosis in Pregnancy

- Coccidioidomycosis (Valley Fever) is a rare infection arising from fungal pathogen *Coccidioides immitis*
- *C.immitis* resides predominantly in the soil and is endemic to certain regions in Southwestern US, Mexico and certain parts of Central America
- About 10,000 cases Coccidioidomycosis annually in the US (2.1 of those cases among pregnant people)
- Risk factors: residing in an endemic area, immunocompromised persons, frequent dust exposure



Case details

29 year old G3P2 female at 33 weeks gestation p/w one week of difficulty walking, worsening lower back pain and bilateral lower extremity numbness

PMH/Social Hx: Two previous uncomplicated spontaneous vaginal births. Originally from Oaxaca, Mexico. Currently lives in Central Valley, CA

Notable Meds: None

Notable Labs: Hbg 7.2

PE:

- Neuro: A&Ox3, no neuro deficits, minimal rectal weakness
- CV: RRR, no murmurs appreciated
- Pulm: CTAB, normal work of breathing
- Abdomen: soft, non-distended, non-tender

MRI total spine:

- 22 x 9 x 15cm spinal mass ranging from L5-S2
- Infiltration into the psoas muscle and ventral epidural space
- Severe spinal canal stenosis

Additional work up:

- CT guided FNA biopsy

Management and Review

- Admission to antepartem service with serial neuro exams
- Initiation of IV amphotercin for at least 8 weeks per Infectious Disease service
- At 35w, patient experienced preterm contractions with multiple decelerations on fetal heart tracing
- Delivery of patient at 35w via CS w/ General Anesthesia (neuroaxial technique not offered)
- 1 week after delivery, patient underwent an uncomplicated L4-pelvis laminectomy and fusion

