

Clinical Vignette: A Case of Rheumatoid Vasculitis Following Empyema

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Rheumatoid vasculitis is a rare necrotizing vasculitis of small and medium-sized vessels that represents the most serious extra-articular manifestation of rheumatoid arthritis (RA). Its effects are wide-ranging; skin involvement is the most common manifestation and may present in the form of palpable purpura, digital gangrene, and nail bed infarcts. Peripheral nerve involvement including mononeuritis multiplex are also commonly seen. Mortality rates remain high with an approximated 40-60% mortality rate within five years of onset, often related to infection and end-organ damage from active vasculitis.

We present a case report of a 77-year-old male with chronically under-treated RA who developed rheumatoid vasculitis following the diagnosis of empyema secondary to aspiration pneumonia. His hospital course was complicated by the development of an unstable GI bleed, likely secondary to rheumatoid vasculitis. This case demonstrates the importance of proper management of RA, and provides support to theories that uncontrolled inflammation in at-risk individuals can contribute to the development of this rare but important complication of RA.