

ENTEROBACTER CLOACAE MENINGOENCEPHALITIS LEADING TO SEVERE NEUROLOGICAL SEQUELAE IN NEWBORNS:

A CASE REPORT

Aim

To report a rare case of necrotizing *E. cloacae* meningoencephalitis in a preterm infant and highlight the potential for severe neurological complications

SSN ANNUAL MEETING 2025







Case history

- Male infant 29 GA (BW 680 g, Apgar 6/6/9)
- DOL 30 signs of LOS
- E. cloacae positive in blood and CSF cultures
- Intubation, transfusions, antibiotic escalation, generalized seizures
- Imaging: extensive necrosis of both cerebral hemispheres, the corpus callosum, basal ganglia, and signs of raised intracranial pressure
- **EEG**: pathologic background pattern



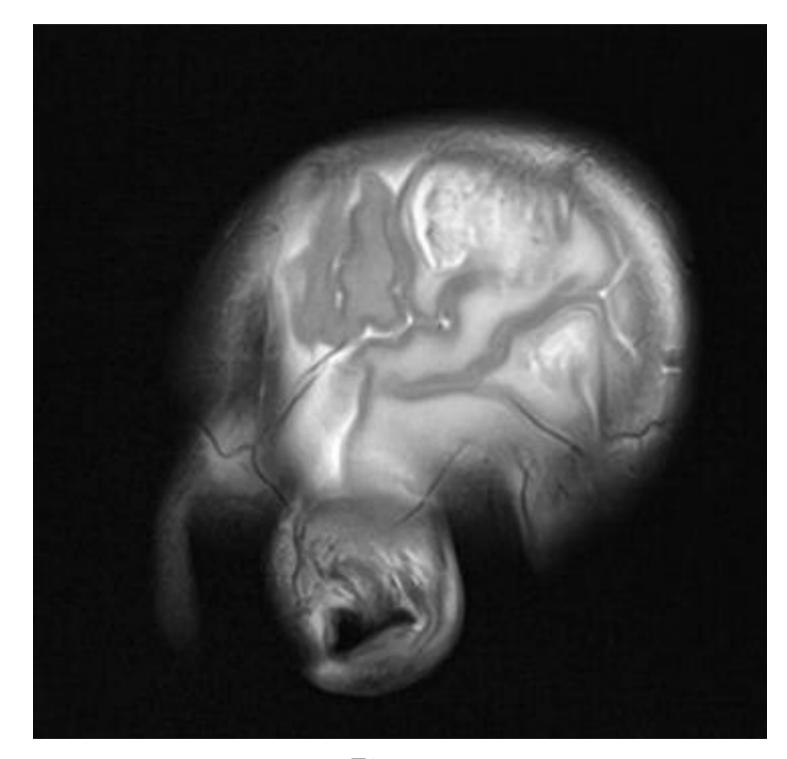






Discussion and Conclusion

- *E. Cloacae* can cause severe CNS infections in preterm infants
- Early signs are often subtle and mimic prematurity-related conditions
- Prompt diagnosis and escalation of antimicrobial therapy are essential
- Neurological sequelae can be profound and permanent



T2 tse sag







Authors & Affiliation

Authors: Dr. Arianna Voci, Dr. Antonia Hauser, PD Dr. Beate Grass

Ultrasound Images: Dr. Tobias Muehlbacher

Affiliation: Department of Neonatology, University Hospital Zurich, Switzerland

Literature

- 1. Chen HN, et al. Late-onset Enterobacter cloacae sepsis in very-low-birth-weight neonates: experience in a medical center. Pediatr Neonatol. 2009 Feb;50(1):3–7.
- 2. Maheshwari N, et al. an 'ICU bug' causing community acquired necrotizing meningo-encephalitis. Eur J Pediatr. 2009 Apr;168(4):503–5.
- 3. Reddy CM, et al. Neonatal meningitis due to Enterobacter cloacae. J Natl Med Assoc. 1978 May;70(5):347–8.
- 4. Ferry A, et al. Enterobacter cloacae colonisation and infection in a neonatal intensive care unit: retrospective investigation of preventive measures implemented after a multiclonal outbreak. BMC Infect Dis. 2020 Sep 17;20(1):682.





