**Abstract**

Haemophagocytic Lymphohistiocytosis (HLH) can occur as a rare complication of dengue fever. Early recognition of the condition and appropriate immunosuppressive treatment can prevent mortality and improve long term outcome. This patient is a 54 year old female who was initially managed for dengue fever and went home without any complications. The patient presented again with high grade fever and body aches for two days. Fever, leukopenia, thrombocytopenia, hepatocellular dysfunction, a markedly elevated ferritin level, and a bone marrow demonstrating abundant hemophagocytosis were present. Her clinical picture and extensive investigations fulfill the diagnosis of HLH. She responded well to steroid without further complications. As dengue is a common diseases in Sri Lanka, clinicians must be aware of its rare but serious complications.