

Abstract

Streptococcus bovis infective endocarditis is a known cause for colorectal disease since 1951. It is a normal gut commensal that causing infective endocarditis in certain situations. We report an elderly woman presented with acute diarrhoea and infective endocarditis. Subsequently she was diagnosed to have rectal adenocarcinoma with local disease.

Keywords; Infective endocarditis, commensal organism, diarrhea.

This patient presented with diarrhoea and fever with evidence of IE found to have *Streptococcus bovis* bacteraemia. Therefore she underwent colonoscopy and biopsy which revealed colonic carcinoma.

Case presentation

A 70-year-old previously healthy lady presented with fever and diarrhoea for 10 days. Diarrhoea was associated with blood and mucous, type 6 according to the Bristol stool classification, moderate volume, 5-6 times per day. She noticed dark urine and reduced urine output on the day of admission. No associated vomiting but had loss of appetite. She didn't have cough, sore throat or chest pain at rest. No history of headache or photophobia. She was known to have allergy to penicillin without anaphylaxis. On examination she was febrile (102.0 F) with features of mild dehydration. She didn't have conjunctival pallor or cervical, axillary or inguinal lymphadenopathy. On cardiovascular examination pulse rate was 106 bpm with normal volume pulse, blood pressure 116/70mmHg, apex