

Abstract

40-year-old previously healthy female presented with a history of high-grade fever for 3 days duration along with arthralgia, myalgia, lethargy, malaise, loose stools and headache. Initially she was managed as Dengue fever in the background of low platelet count (78000/ μ l), low white cell count (2800/ μ l) and positivity of NS1 antigen. She recovered from Dengue fever on day 6 of illness with rising platelets, but later her recovery phase was complicated by canula site infection and cellulitis giving rise to staphylococcal septicemia and cavitatory pneumonia. Further evaluation of intermittent spikes of fever, persistent tachycardia, loose stools and hand tremors discovered thyrotoxicosis which was probably triggered by dengue infection. She was started on carbimazole for thyrotoxicosis, but unfortunately antithyroid drugs were withheld due to the development of carbimazole induced agranulocytosis and ultimately patient was referred to radio-iodine therapy for further management of thyrotoxicosis.