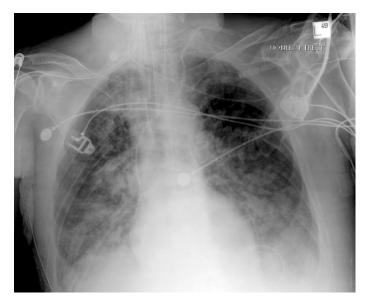
## Presentation

Admitted to ICU with necrotizing fasciitis, septic shock and acute renal failure. Progressive respiratory failure requiring ventilation.

## **Patient Data**

Age: 65 years

Gender: Male



Multifocal bilateral air-space opacities, in a predominantly perihilar and lower zone distribution.

## **Case Discussion**

This is a characteristic appearance of ARDS in the appropriate clinical context.

The differential diagnosis includes infection (also a common complication of ARDS), and cardiogenic pulmonary edema. Differentiation can be impossible in some cases.

The causes of ARDS include:

- trauma
- septicemia
- hypovolemic shock
- fat embolism
- near-drowning
- burns
- viral pneumonia
- pancreatitis
- oxygen toxicity
- disseminated intravascular coagulopathy

ARDS mortality is high, around 50%, and many survivors develop chronic lung disease, with damaged lung healing by fibrosis. A minority recover fully.