Meningitis caused by *Pseudomonas paucimobilis*

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**SUMMARY** This appears to be the first report of meningitis due to *Pseudomonas paucimobilis* and the first report of a clinically significant isolate of this species in the UK. Characteristics by which the species may be recognised are given, and attention is drawn to the possible confusion of *Ps. paucimobilis* with other yellow-pigmented pseudomonads and *Flavobacterium* species.

*Pseudomonas paucimobilis* is a species described only recently (Holmes *et al.*, 1977). The strains on which the description of the species was based had been recovered largely from human clinical specimens and the hospital environment, but none was known to be the causative agent of infection. Although the clinical significance of *Ps. paucimobilis* remained unknown we now report what is, as far as we know, the first case of meningitis due to this species.

**Case report**

A 39-year-old male epileptic was admitted on 24 June 1978. He had had epilepsy for three years and was currently treated with phenobarbitone 60 mg and phenytin 100 mg three times a day. He complained of headache for two days and had started to have convulsions on the day of admission. This was controlled with a single dose of 20 g diazepam intravenously. However, he remained very drowsy 6 hours later, and the axillary temperature was found to be 39.2°C (103°F). Clinical examination showed neck stiffness and a positive Kernig’s sign.

A lumbar puncture was performed and turbid fluid obtained, giving the following results: white cells 0.2 × 10⁶/l (200/mm³), 95% lymphocytes, 5% neutrophils; protein 0.4 g/l (40 mg/100 ml), glucose 3.7 mmol/l (67.2 mg/100 ml); the blood glucose level was 4.7 mmol/l (85 mg/100 ml). Gram and Ziehl-Neelsen films were initially reported as negative. However, 48 hours later repeat examination of the original Gram-stained film revealed numerous Gram-negative rods. Other tests included haemoglobin 15.4 g/dl, white cell count 12.8 × 10⁶/l (12 800/mm³), 82% neutrophils showing toxic granulation and a shift to the left. A chest film was normal.

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**BACTERIOLOGY**

Cultures of cerebrospinal fluid and blood, taken before the start of treatment, were incubated aerobically at 37°C on blood agar. After 48 hours cultures of both specimens yielded a moderately heavy pure growth of a yellow-pigmented, non-fermentative, Gram-negative, rod-shaped bacterium which could not be identified by routine laboratory tests. The isolates were sensitive to rifampicin.

Three isolates, two from cerebrospinal fluid and one from blood, were submitted to the National Collection of Type Cultures for computer-assisted identification. There, a set of 68 characteristics were determined for each isolate using methods described previously (Holmes *et al.*, 1975). In these tests the three isolates yielded identical results (Table), thereby indicating that the isolates represented a single strain. On the results of these characteristics, in conjunction with an unpublished probability matrix, the isolates were identified as *Ps. paucimobilis*. The isolates proved typical of the species except in their ability to produce an alkaline reaction on Christensen’s citrate medium and in their inability to produce acid from salicin in ammonium salt sugar medium.

Cultures of swabs taken from the nose, throat, ear, and axilla of staff examining specimens in the laboratory, and from the houseman who performed the lumbar puncture and took blood for culture
from the patient described above, proved negative for *Pseudomonas paucimobilis*.

**Discussion**

Two of the strains on which the original description of *Pseudomonas paucimobilis* was based were representative of a group that had been designated group IIk, biotype 1 by workers at the Center for Disease Control, Atlanta, USA (Tatum et al., 1974). This implies that group IIk, biotype 1 and *Pseudomonas paucimobilis* are the same taxon, and thus, even before the description of *Pseudomonas paucimobilis*, isolates belonging to the species were being recognised in human clinical material, principally from blood, environmental sources, spinal fluid, urine, and various wounds and abscesses (Tatum et al., 1974). Although they would have been labelled unclassified non-fermenters when first received, after several isolates had been collected, strains were recognised as belonging together in a distinct taxon, provisionally as group IIk, biotype 1, but later as *Pseudomonas paucimobilis*. However, because initial isolates of the taxon were labelled only as unclassified non-fermenters, clinical details were not requested on receipt of the strains, and consequently none was known to be implicated as a cause of infection. Also group IIk, biotype 1 was little recognised outside the USA, but since the naming of *Pseudomonas paucimobilis* the species has become more widely known and recognised in clinical laboratories, and clinically significant isolates have been recognised: from a leg ulcer in Australia (Peel et al., 1979) and from a septicæmia in the USA (Slotnick et al., 1979). The case herein reported appears to be the first of a clinically significant isolate of this species in the UK and the first report of this species as a cause of meningitis.

*Pseudomonas paucimobilis*, because of its yellow pigment and because motility is difficult to demonstrate (room temperature in a hanging-drop preparation is recommended, and even then only a very low proportion of the cells may be actively motile), is most likely to be confused with *Flavobacterium* spp. However, *Flavobacterium* spp. usually grow on MacConkey agar, produce caseinase and gelatinase, and show resistance to carbenicillin and gentamicin, characters rarely, if ever, seen in *Pseudomonas paucimobilis*. Yellow-pigmented strains of *Pseudomonas cepacia*, *Pseudomonas maltophilia*, and *Pseudomonas stutzeri* may also be encountered occasionally, but, as well as all growing on MacConkey agar, they can be further distinguished from *Pseudomonas paucimobilis* by production of caseinase and growth on Simmons' citrate in the case of *Pseudomonas cepacia*, production of caseinase, gelatinase, and decarboxylation of lysine in *Pseudomonas maltophilia*, and by the wrinkled colonies and nitrate reduction (to nitrogen gas) in *Pseudomonas stutzeri*.

The role played by *Pseudomonas paucimobilis* in infections is still uncertain although it may be responsible for various opportunistic infections. However, our patient had been previously healthy, had not been on any antibacterial therapy, and had had no recent contact with hospitals. The association of *Pseudomonas paucimobilis* with moist sites suggests that the species is water-borne, and it is therefore possible that initial entry into the body was through the gastro-intestinal tract. Failure to recover the organism from staff involved in the collection and examination of the patient specimens reinforces our belief that

### Table Characteristics of the three isolates of *Pseudomonas paucimobilis* examined

<table>
<thead>
<tr>
<th>Isolates positive in:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Acid from the following ammonium salt sugars:</td>
<td>lactose</td>
<td>Alkal production on Christensen's citrate agar</td>
</tr>
<tr>
<td>glucose</td>
<td>maltose</td>
<td>Poly-β-hydroxybutyrate production</td>
</tr>
<tr>
<td>arabinose</td>
<td>raffinose</td>
<td>inclusion granules</td>
</tr>
<tr>
<td>cellobiose</td>
<td>surose</td>
<td>Production of yellow pigment</td>
</tr>
<tr>
<td>ethanol</td>
<td>trehalose</td>
<td>Tween 20 hydrolysis</td>
</tr>
<tr>
<td>fructose</td>
<td>xylate</td>
<td>Tween 80 hydrolysis</td>
</tr>
<tr>
<td>Isoalacte in:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acid from glucose (10 g/100 ml)</td>
<td>Growth at 42°C</td>
<td></td>
</tr>
<tr>
<td>acid from lactose (10 g/100 ml)</td>
<td>Growth on cetrimide agar</td>
<td></td>
</tr>
<tr>
<td>dulcitol</td>
<td>Arginine desimidase</td>
<td>Growth on MacConkey agar</td>
</tr>
<tr>
<td>glycerol</td>
<td>Arginine dihydrolase</td>
<td>Growth on Simmons' citrate agar</td>
</tr>
<tr>
<td>inositol</td>
<td>Casein digestion</td>
<td>Hydrogen sulphide production†</td>
</tr>
<tr>
<td>mannitol</td>
<td>Fluorescence on King's medium B</td>
<td>Indole production</td>
</tr>
<tr>
<td>rhamnose</td>
<td>Gas from PWS glucose</td>
<td>KCN tolerance</td>
</tr>
<tr>
<td>salicylic</td>
<td>Gelatine production*</td>
<td>Lysine decarboxylase</td>
</tr>
<tr>
<td>sorbitol</td>
<td>Gluconate oxidation</td>
<td>Malonate production</td>
</tr>
<tr>
<td>Acid from PWS glucose</td>
<td>Growth at 37°C</td>
<td>Motility‡</td>
</tr>
</tbody>
</table>

PWS = peptone water sugar.

*By stab and plate methods.
†By both lead acetate paper and triple sugar iron agar methods.
‡At both 37°C and room temperature (18°C-22°C).
Ps. paucimobilis was the causative agent of meningitis in this patient.

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References


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