

Clinical Image

Open Access, Volume 6

Rash of rhabdomyolysis

Man Yi¹; Yue Yin^{2*}

¹First Affiliated Hospital of Guilin Medical University, China.

²Guilin Medical University, China.

***Corresponding Author: Yue Yin**

Guilin Medical University, China.

Email: lycwr@hotmail.com

Received: Jun 30, 2025

Accepted: Jul 30, 2025

Published: Aug 06, 2025

Archived: www.jcimcr.org

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DOI: www.doi.org/10.52768/2766-7820/3724

Description

A 34-year-old woman presented to the clinic with severe muscle pain of both thighs and tea-colored urine for two days after spinning class. Physical examination found small dots and diffused rash around the popliteal fossa region of both legs (Figures 1A and 1B). The affected skin was warm without pain or pruritus. Laboratory tests showed a serum creatine kinase level of 79194 U/L (reference range 40-200 U/L) and myoglobin level of 11382 ng/ml (reference range 0-146.9 ng/ml). The patient

was diagnosed with rhabdomyolysis and erysipelas. Intravenous fluids were administered, and antibiotics were prescribed to treat erysipelas. Oral moxifloxacin hydrochloride 400 mg per day was prescribed because the patient's allergic to cephalosporins. The patient stopped taking moxifloxacin hydrochloride after one day. The patient's rash is an unusual allergic reaction during rhabdomyolysis. The rash disappeared with leg pain after 5 days and the patient made a full recovery.

Authors' contributions: YY wrote the manuscript.

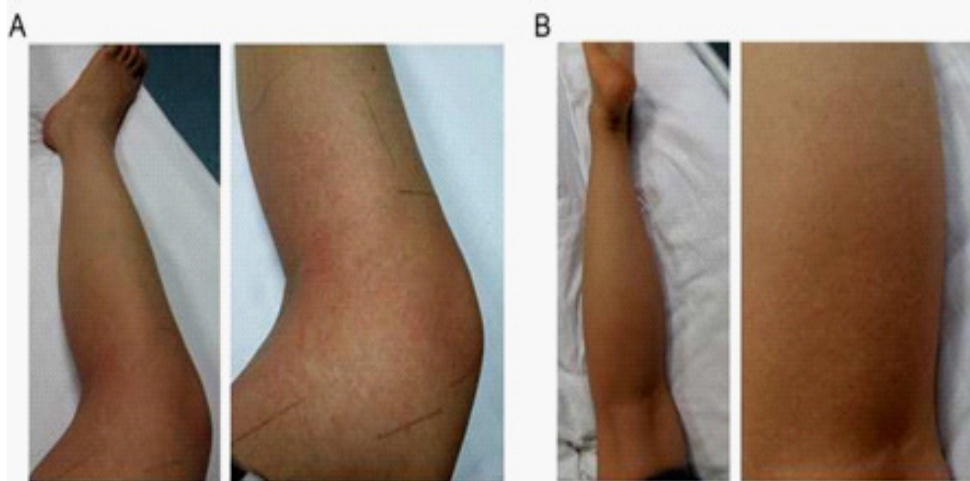


Figure 1: Clinical image.

Citation: Yi M, Yin Y. Rash of rhabdomyolysis. J Clin Images Med Case Rep. 2025; 6(8): 3724.