

TABLE E-1 Clinical Data on Athletes with Pubic Osteomyelitis*

Case No.	Study	Age (yr)	Sex	Predisposing activity	Duration of Symptoms to Diagnosis (days)	Temperature on Admission (°C)	ESR (mm/hr)	WBC count/PMN (10 ³ /mm ³ /%)
1	Present report	20	M	Soldier – intensive training (<i>Leishmania tropica</i>)	12	38.5	66	Normal
2	Baril et al. ⁵ (1998)	40	M	Marathon (toenail loss)	12	40	NA	13.6 / 93
3	Ukwu et al. ⁶ (1992)	21	M	Football practice	30	38.7	61	8.4
4	Ukwu et al. ⁶ (1992)	43	M	Runner (stumbled)	7	39.4	31	6.9 / 74
5	Ukwu et al. ⁶ (1992)	31	M	Jogging	17	39.4	94	13.1 / 80
6	Lopez-Guerra et al. ⁷ (1988)	22	M	Professional soccer player	28	38.7	102	13 / 80
7	Lopez-Guerra et al. ⁷ (1988)	14	F	Tennis player (wound on left leg)	10	37.8	100	12 / 74
8	Hedstrom and Lidgren ⁸ (1982)	35	M	Football trainer	Few weeks	40.6	19	10.2 / 90
9	Hedstrom and Lidgren ⁸ (1982)	24	M	Handball player	7	38.5	27	Normal
10	Hedstrom and Lidgren ⁸ (1982)	12	M	Active football player (trauma to gluteal region causing a fracture)	NA	38	52	12.7 / 90
11	Sexton and Heskestad ⁹ (1993)	21	M	Football player	1	38	NA	NA
12	Karpos et al. ¹⁰ (1995)	21	M	Football player	4	39.2	19	12.1 / 85
13	Combs ¹¹ (1998)	48	M	Weightlifter	8	39.3	81	16.3
14	Sibilia et al. ¹² (1993)	20	M	Rugby player	15	38	115	NA
15	Sibilia et al. ¹² (1993)	26	M	Football player	11	38	90	NA
16	Ruel et al. ¹³ (1984)	19	M	Football player (wound on right leg)	4	39.6	29	5.5 / 67
17	Ruel et al. ¹³ (1984)	21	M	Football player	20	38	110	9.3 / 82
18	Pauli et al. ¹⁴ (2002)	23	M	Football and tennis	4	38	28	11.2/80
Average and standard deviation		25±10	/	/	12.8±9	38.7±0.8	66±34	11.1±3

*ESR = erythrocyte sedimentation rate, WBC = white blood-cell count, and PMN = polymorphonuclear neutrophil leukocytes. NA = not available.

TABLE E-2 Diagnosis and Treatment*

Case No.	Study	Method of Diagnosis	Culture (source)	Treatment	Complications
1	Present report	Bone scan	<i>Staphylococcus epidermidis</i> (aspiration)	Intravenous Cloxacillin – 6w	None
2	Baril et al. ⁵ (1998)	MRI – increased T2 signal	<i>Staphylococcus aureus</i> (blood)	IV Oxacillin, IV Gentamicin	None
3	Ukwu et al. ⁶ (1992)	Bone scan	<i>Staphylococcus aureus</i> (aspiration)	IV Nafcillin, 2w PO Dicloxacillin, 4m IV Clindamycin, 2w	Recurrence after treatment discontinued: an abscess
4	Ukwu et al. ⁶ (1992)	Initial bone scan normal Diagnosis by WBC scan	<i>Staphylococcus aureus</i> (blood)	IV Oxacillin, 6w	None
5	Ukwu et al. ⁶ (1992)	Initial radiograph, bone scan and CT were normal. Diagnosis – radiograph - erosion	Negative, prior antibiotics	IV Vancomycin, 8w	None
6	Lopez-Guerra et al. ⁷ (1988)	Radiograph-osteolytic lesion Bone scan	<i>Staphylococcus aureus</i> (blood)	IV Vancomycin, 4w	None
7	Lopez-Guerra et al. ⁷ (1988)	Radiograph (rarefaction) and bone scan	<i>Staphylococcus aureus</i> (blood)	IV Cloxacillin, 4w	None
8	Hedstrom and Lidgren ⁸ (1982)	Diagnosis made on clinical suspicion and microbiology, radiograph only later (sclerotic bone)	<i>Staphylococcus aureus</i> (blood)	IV Cefalotin PO Dicloxacillin, 6m	None
9	Hedstrom and Lidgren ⁸ (1982)	Initial radiograph normal Diagnosis by bone scan	<i>Staphylococcus aureus</i> (blood)	IV Cloxacillin, 8d PO Flucloxacillin, 6m	Initial appendectomy
10	Hedstrom and Lidgren ⁸ (1982)	Infection (pus) during open operation for fracture	<i>Staphylococcus aureus</i> (tissue biopsy)	IV Cloxacillin and Penicillin, 1w PO Cloxacillin, 6w	None
11	Sexton and Heskestad ⁹ (1993)	Aspiration – pubic bone	<i>Staphylococcus aureus</i> (tissue aspirate)	Antibiotics, 6w	None
12	Karpos et al. ¹⁰ (1995)	MRI – increased T2 signal	<i>Staphylococcus aureus</i> (blood and tissue aspirate)	IV Nafcillin, 2w IV Vancomycin, 1w PO Dicloxacillin and Probenecid, 2w	None
13	Combs ¹¹ (1998)	Initial radiograph normal Diagnosis by bone scan	<i>Staphylococcus aureus</i> (blood)	IV Nafcillin, 6w	None
14	Sibilia et al. ¹² (1993)	Bone scan	<i>Staphylococcus aureus</i> -MRSA (blood)	IV Vancomycin PO Rifampin	None
15	Sibilia et al. ¹² (1993)	Initial radiograph was normal. Diagnosis by biopsy	Peptostreptococcus (tissue biopsy)	IV Methicillin IV Aminoglycoside	None
16	Ruel et al. ¹³ (1984)	Diagnosis – radiograph	<i>Staphylococcus aureus</i> (blood)	IV Oxacillin, 1w IV Gentamycin, 1w PO Pristinamycin, 1m	None
17	Ruel et al. ¹³ (1984)	Diagnosis – radiograph (osteolysis)	<i>Staphylococcus aureus</i> (surgical drainage)	IV Oxacillin, 1m Hyperbaric O ₂ , 15 cycles	None
18	Pauli et al. ¹⁴ (2002)	Bone scan , MRI and biopsy	<i>Staphylococcus aureus</i> (tissue biopsy)	IV Cloxacillin 10d PO Ofloxacin 4w	Initial appendectomy

*w = week, m = month, d = day, IV = intravenous, MRI = magnetic resonance imaging, PO = per os (orally), WBC = white blood-cell count, CT = computed tomography, and MRSA = Methicillin-resistant *Staphylococcus aureus*.