Clinical Image

Purple Sign of Urine Bag

Wu ECH1 and Shiao C-C2,3*

¹Department of Internal Medicine, Saint Mary's Hospital Luodong, Luodong Township, Yilan, Taiwan ²Division of Nephrology, Department of Internal Medicine, Saint Mary's Hospital Luodong, Luodong Township, Yilan, Taiwan ³Saint Mary's Junior of Medicine, Nursing and Management, Yilan, Taiwan

*Corresponding author: Chih-Chung Shiao, Division of Nephrology, Department of Internal Medicine, Saint Mary's Hospital Luodong, Yilan, Taiwan

Received: September 19, 2018; **Accepted:** September 26, 2018; **Published:** October 03, 2018

Clinical Image

A 61-year-old afebrile female patient in bedridden status with an indwelling urinary catheter presented to the outpatient clinic with turbid urine and purple discoloration of urine bag (Figure 1). Her medical history was remarkable for recurrent urinary tract infections and chronic constipation. After replacement of the urinary catheter and subsequently a short course of oral antibiotic, the purple discoloration in the urine bag was not witnessed in the next followup. Purple Urine Bag Syndrome (PUBS) is a rare phenomenon beginning with tryptophan being deaminated by the gut bacteria to indole, which is absorbed into the portal circulation and metabolized by the liver into indoxyl sulfate to be excreted in urine. Risk factors for developing PUBS include female gender, bedridden status, severe constipation, alkaline urine, renal failure, and Polyvinyl chloridecontaining bags. Although being considered almost always harmless, PUBS might also indicate severe urinary tract infections with potential Fournier gangrene and sepsis, thus a further evaluation might be warranted.



Figure 1: Purple discoloration of urine bag.