Navigating Language Barriers in a Case of Viral Induced Pancytopenia

Epstein-Barr virus and Cytomegalovirus are prevalent in 80-90% of the world's population. These viruses can manifest in a variety of ways, ranging from an asymptomatic presentation to fatigue, fever, splenomegaly, pharyngitis, and many other symptoms. A rarely reported presentation, however, is pancytopenia, due to a malfunction in bone marrow production. Our patient was a 69 year old male who was complaining of fatigue, sweats, and fever for 2 weeks, and yellowing of the skin for 1 week. His labs were significant for pancytopenia. Additional history and results revealed that our patient was positive for IgM antibodies for both EBV and CMV. He was treated supportively with fluids, antipyretics, and blood transfusions. He was discharged once his cell counts improved and monitored with outpatient follow-up. In addition, patient care was complicated by a language barrier; our patient was Fuzhounese speaking and translating services were not always available. Language barriers can hinder patient care and lead to worse outcomes. To navigate this barrier and communicate with the patient, we worked with his daughter, who was Mandarin and Fuzhounese speaking, and a Mandarin-English interpreter. We found working together with the family allowed us to ensure proper care for our patient. Ultimately, we describe an interesting case of virally induced pancytopenia with an additional layer of complexity brought on by a language barrier.