A case of ecthyma gangrenosum in immunocompromised patient

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A 80-year-old female with pancytopenia from chemotherapy for Hodgkin lymphoma developed one week ago fever and a painless red macule under her left breast.

Physical exam revealed an ulcerating lesion with central necrosis, measuring 4 cm in diameter surrounded by a halo of erythema under left breast (Fig. 1).

The patient was started on broad-spectrum antibiotics. Blood and lesion cultures revealed Pseudomonas Aeruginosa confirming the diagnosis of ecthyma gangrenosum. The initial empirical treatment was switched to parenteral third generation cephalosporins.

Ecthyma gangrenosum (EG) is a rare skin infection classically associated with Pseudomonas aeruginosabacteraemia. Clinically, it progresses sequentially from maculopapular lesion to haemorrhagic bulla and then to necrotic ulcers surrounded by an erythematous halo. It usually affects immunocompromised patients (neutropaenia, hematological malignancies) and rarely occurs in immunocompetent subjects. The diagnosis is generally made based on the clinical appearance and evolution of the lesions along with a positive blood or wound cultures.

Antibiotic therapy with spectrum for Pseudomonas aeruginosa includes aminoglycosides, third- and fourth-generation cephalosporins, β-lactam antibiotics, and broad-spectrum penicillins.

Prognosis depends on the degree of immunosuppression and on the host.

Consent

The examination of the patient was conducted according to the Declaration of Helsinki principles.

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that the names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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