Sir,

Cytobacteriological examination of urines is a complementary examination of daily practice. Its indications may have some particularities from one discipline to another. To study the particularities of the indications and the results of this examination in dermatology, we present the results of this prospective study, conducted over three months (February-April 2018), within the dermatology department of the Mohammed V Military Teaching Hospital of Rabat.

20 cases were collected, including 12 men and 8 women, the age of patients ranged between 10 and 79 years with an average of 49.95 years. The reasons for hospitalization in dermatology were: plantar ulcer and sore throat 25%, autoimmune bullous dermatoses 20%, toxidermia 10%, extended or resistant psoriasis 10%, lichen 10%, immunoallergic dermatoses 10%, cutaneous lymphomas 5%, Lupus 5% and HIV infection 5%. The indications were: urinary symptomatology 35%, pre-corticosteroid exploration 30%, pre-biotherapy exploration 10%, immunoallergic assessment 10%, HIV assessment 5%, interpretation of proteinuria of 24 hours 5%, pre immunosuppressive assessment 5%. The results obtained were: urinary infection 55%, aseptic leukocyturia 10%, contamination 10%, leukocyte-free bacteriuria 5% and sterile 20%. The offending organisms were: E. Coli (3 cases), Klebsiella Pneumoniae (one case), Staph. Aureus (2 cases), Proteus Mirabilis (two cases), Acinetobacter Baumannii (2 cases) and Candida Albicans (one case). In the 12 cases treated, the antibiotic used was: amoxicillin-clavulanic acid 10%, Ciprofloxacin 25%, Ceftriaxone 5%, Fucidine 5%, Imipenem-Levofoxacin 10%, Imipenem-Colistin 5%.

Our study, despite its low sampling, shows that cytobacteriological examination of urines is a common exam in everyday practice. Its main indications, apart from a patent urinary symptomatology, are; the pre-therapeutic assessment by corticotherapy, immunosuppressors and biotherapies, the interpretation of a proteinuria especially in connectivites and vasculitis, the exploration of some immunoallergic dermatoses and HIV infection. The main results obtained are; the predominance of the digestive flora, the frequency of contaminations by skin flora, the frequency of nosocomial germs resistant in patients with long-term urinary catheters and in patients with long periods of hospitalization [1-5]. Cytobacteriological examination of urines has a particular interest in a dermatology department both in the diagnostic and therapeutic stages. Our study shows the interest of the hygiene and asepsis measures to avoid contaminations and the interest of shortening the duration of hospitalization of the patients under immunosuppressive treatments to prevent nosocomial infections more and more frequent and more and more resistant.

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 their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity can not be guaranteed.

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