

Pustular eruption on the face revealing HIV infection

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Numerous infections arise during the course of an HIV-positive person's evolution, most often leading to AIDS disease. Most of them are said to be opportunistic and induced by severe immunodepression.

HIV-associated suppurative folliculitis is usually of bacterial origin [1]. When bacterial cultures are performed, Staphylococcus aureus is the most often organism implicated [2].

Bacterial folliculitis is common in HIV patients, whose immunity is still apparently normal but in fact, recognizes a qualitative deficit. However, they occur in almost one out of two AIDS patients in an advanced immunodepressive situation.

In a study of 40 HIV-positive patients, suppurative folliculitis was the cause of follicular eruptions in two-thirds of cases [3].

We report a case of suppurative folliculitis limited to the face revealing an HIV infection.

A 45-year-old divorced man who has just been released from prison, presented with a week's history of pustular eruption on the face and a flu-like syndrome (fever, chills, and sore throat) one week prior. Clinical examination showed multiple confluent follicular and non-follicular pustules on the face, forehead, and lateral aspect of the neck on erythematous skin (Figs. 1a – 1d). Examination of the oral mucosa found pharyngitis.

HIV infection was suspected given the patient's history, symptoms and was confirmed by serology. The patient was put on macrolide and a skin biopsy was planned but the pustular lesions have disappeared (Figs. 2a – 2d).



Figures 1: (a-d) Clinical picture showing multiple confluent follicular and non-follicular pustules on the face, forehead, and lateral aspect of the neck.

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Figures 2: (a-d) Clinical picture showing the disappearance of the lesions after antibiotic treatment.

Consent

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

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