

# An unusual entry site of non-necrotising dorsal dermo-hypodermatitis

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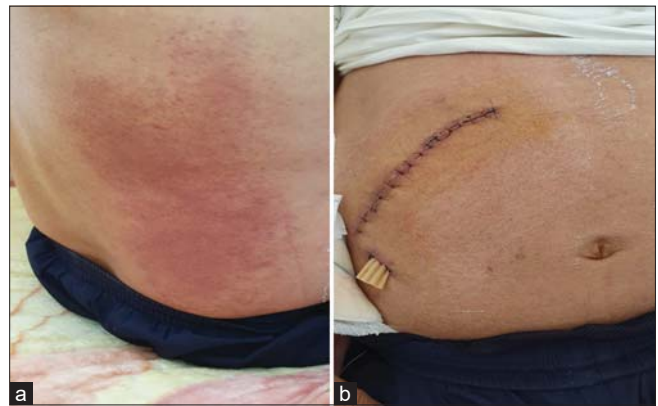
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Non-necrotizing dermo-hypodermatitis is a common skin infection. It develops in the deep dermis after bacteria enter through breaks in the skin. The majority of the germs responsible are *Streptococcus pyogenes* and *Staphylococcus aureus* [1].

It presents with expanding erythema, warmth, tenderness, and swelling. Individuals of any age or sex can be affected [1]. It is quite common and typically develops in the lower limbs. However, atypical cases may occur. Abdominal and dorsal dermo-hypodermatitis is a rare localization whose most reported causes are perforation of hollow intraperitoneal organs [2,3]. An urgent abdominal radiological examination must be carried out to eliminate intra-abdominal perforation or infection.

A 68-year-old patient admitted to visceral surgery for an appendicular abscess that had benefited from excision and surgical drainage. 48 hours after the procedure, the evolution was marked by the appearance of a warm, erythematous, oedematous dorsal lesion, painful (Figs. 1a and 1b) without necrosis, subcutaneous crackling, or sensitivity disorders, without a breach or inguinal intertrigo, which can explain the site of entry of the germ, and with a good general condition. The biological assessment revealed an increase in CRP and leukocytes. An abdominal ultrasound and CT scan showed infiltration of the soft tissues. Faced with the atypical location and the absence of a skin entry site we have concluded to a dorsal dermo-hypodermatitis and the surgical site as a site to enter the germ. The patient was placed under local health care with a suitable intravenous antibiotic, and then the patient had a progressive regression of cutaneous lesions.



**Figure 1:** (a) Dorsal dermo-hypodermatitis with erythematous oedematous lesion. (b) the surgical site as the entry point.

## Consent

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

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