A decade old case of actinomycetoma evading «diagnosis»

Un caso de actinomicetoma de una década de antigüedad que esquiva el diagnóstico

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Received 29 January 2019; accepted 9 April 2019

Figure 1  Actinomycetoma of the foot. (A) Tumefaction with multiple discharging sinuses over right foot. (B) Histopathology showed lymphohistiocytic infiltrate and polymorphs with characteristic basophilic grain surrounded by eosinophilic material (haematoxylin and eosin stain, magnification ×100).

A 45 year old female farmer presented with swelling of right foot and multiple discharging sinuses for 15 years. The patient had developed a nodule at the site of thorn prick which ruptured to form a sinus and over the next few years, multiple discharging sinuses developed over the plantar and medial aspect of right foot. The discharge was pustular without passage of grains. Several treatments from general practitioners provided no cure. Cutaneous examination revealed tumefaction of right foot with multiple discharging sinuses (Fig. 1A). A provisional diagnosis of mycetoma was made. Gram stained smear of the discharge showed gram positive filamentous bacteria. Biopsy revealed characteristic basophilic grain confirming the diagnosis of actinomycetoma (Fig. 1B). Patient showed complete improvement with Welsh regimen with no recurrence at one year follow-up. The medical treatment of eumycetoma is often disappointing but actinomycetoma shows good response to many chemotherapeutic agents. The patient had never had a dermatologic consultation in 15 years. Early diagnosis and treatment of such cases could save the patient from undue prolonged morbidity and ineffective incorrect treatment.

* Please cite this article as: Mushtaq S. Un caso de actinomicetoma de una década de antigüedad que esquiva el diagnóstico. Actas Dermosifiliogr. 2021;112:552.

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