Dermatology Practical & Conceptual

Dermoscopic Findings in Skin Infection by Mycobacterium Immunogenum

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Case Presentation

A 34-year-old female patient, with no relevant medical history, presented with a painful lesion on her right buttock, accompanied by transparent discharge. This lesion had appeared two weeks after receiving an intramuscular injection of a "cell regeneration product" at the injection site. Examination revealed a 2 cm orange nodule with well-defined borders and whitish areas inside, above an 4 cm erythematous-violaceous plaque (Figure 1A). Dermoscopy revealed a yellowish-orange lesion with thick whitish structures inside and polymorphic vessels (linear irregular, hairpin and comma vessels). It was surrounded by a milky-red area with poorly defined edges (Figure 1B). Biopsy and culture of the lesion were performed. Mycobacterium immunogenum was isolated, and it was decided to start antibiotics.

Teaching Point

Dermoscopic findings in skin infections by Mycobacterium tuberculosis and Mycobacterium leprae have already been described in the literature; however, the available information for atypical mycobacteria is limited to two publications to date [1]. In this case, we observed some dermoscopic findings similar to those described in the literature for other mycobacteria: orange-yellowish areas, whitish structures, and vessels of varying morphology [1]. It is important to consider that the lack of orange areas does not rule out

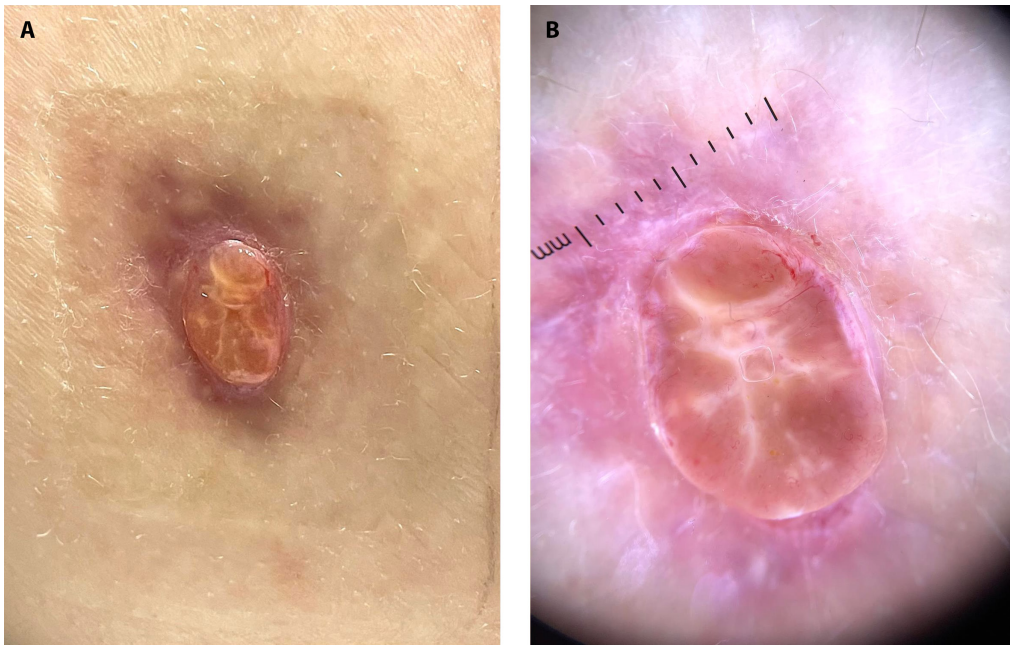

Figure 1. (A) 2 cm orange nodule with well-defined borders and whitish areas inside, above an approximately 4 cm erythematous-violaceous plaque. (B) Yellowish-orange lesion with well-defined borders, with thick whitish structures inside and the presence of polymorphic vessels.

granulomatous infection [2]. This is the first case report in the literature to mention dermoscopic findings in a Mycobacterium immunogenum infection. Therefore, a high index of suspicion for mycobacterial infection should be maintained in the presence of these dermoscopic findings, along with a suggestive medical history, which can guide the diagnostic process toward reaching a microbiological diagnosis.

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