



INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

A CASE OF LEPROSY MISDIAGNOSED AS NODULAR CYSTIC ACNE IN AN ENDEMIC REGION: A CASE REPORT FROM ZIMBABWE

V Mashavave⁽¹⁾ - C Jongwe⁽¹⁾

Harare Central Hospital, Harare Central Hospital, Harare, Zimbabwe⁽¹⁾

Background: Leprosy, an ancient disease that has affected humanity for centuries, is caused by *Mycobacterium Leprae* known to be endemic in tropical regions and parts of Asia. Left untreated, leprosy has a devastating prognosis. With its longstanding history, one would guess leprosy is easy to diagnose at first glance in endemic regions. But, cases of misdiagnosis still occur. Emphasis on continued health education on this chronic infectious disease is still of major relevance in these regions.

Observation: We describe a case of a 22-year-old seen at a dermatology clinic, two years after presenting several times to a district clinic with evenly distributed nodular cystic lesions on his face only. The patient did not present with any other typical symptoms suggesting leprosy, e.g. nasal discharge or loss of sensation over the lesions. His major concern was his cosmetic appearance. General practitioners treated him for cystic acne. Upon referral to the dermatologist, he was initiated on isotretinoin, still under the impression of nodular cystic acne. Some lesions appeared to resolve, but not entirely giving the expected result. A skin biopsy later revealed *Mycobacterium Leprae*. Further, his social history revealed that his mother had died of an unknown cause and had the same nodular lesions on her face, which probably could have been a case of undiagnosed leprosy.

Key Message: The atypical presentation of this case of leprosy and the lack of clinical suspicion delayed diagnosis and treatment. This highlights the need for continued health education to primary health care workers even in such settings where leprosy is endemic. In addition, leprosy should be a differential diagnosis in cases of nodular cystic acne.

