



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

CHROMOBLASTOMYCOSIS: CHALLENGING CASE WITH SATISFACTORY TREATMENT AND MANAGEMENT OF COMPLICATIONS

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Background: Chromoblastomycosis (CBM) is a progressive, granulomatous infection, caused by transcutaneous inoculation of dematiaceous fungi. It is occupational related to farmers as the fungi are found in plants and soil. The predominant etiological agents are *Fonseca pedrosae* and *Cladophiala carrionii*. Further literature addressing CBM is demanding hence it is a chronic and disabling disease which can evolve to SCC and lymphedema. High relapse rates and low cure result in a challenging treatment. The aim of this report is to present a case of progressive evolution and complex treatment with substantial response to cryosurgery.

Observation: Seventy-six year old male, farm worker from North Brazil, referred to the dermatology department manifesting an ulcerated and fetid plaque with warty borders affecting the complete extension of his right thigh leading to walking difficulties. Anamnesis revealed the development of pruritus and ulceration over the right thigh following a trauma during field work 18 years ago. Itraconazole was administered irregularly for 14 years without efficacy. CBM was considered after dermatological examination. Diagnosis was confirmed by biopsy that showed an inflammatory infiltrate including multinucleated giant cells containing brownish spores demonstrating birefringent capsules. Therapy consisted of terbinafine 250 mg twice daily associated with several sessions of cryosurgery with liquid nitrogen. The patient received periodic double freeze-thaw cycles, time ranging between 30-60 seconds. Local pain and edema were expected side-effects. Patient experienced a major complication evolving with local necrosis that required skin grafting. Final outcome was satisfactory. Patient significantly improved the appearance of the lesion, experiencing no signs of pain when walking.

Key message: Literature has demonstrated difficult treatment of CBM, which frequently presents antifungal resistance and relapses. Cryosurgery should always be considered as an adjuvant treatment. The disease is a public health concern in Brazil and it demands





studies with innovative therapeutic proposals.

