



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

## LYMPHOEDEMA AS A RISK FACTOR FOR RECCURENT CELLULITIS OF THE LOWER LEG – CASE REPORT

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**Background:** Although recurrent cellulitis is a common event in chronic lymphoedema, it is important to recognize it, because it can be aggressive with severe symptoms and morbidity, high tendency for recurrence and increased risk of unsuccessful treatment.

**Observation:** We present a case of recurrent cellulitis in a patient with chronic lymphoedema on the right leg after hysterectomy and local dissection of the lymph nodes. We present a case of 57 year-old patient suffering from a chronic painless secondary lower limb lymphoedema in the last 10 years and experienced multiple episodes of cellulitis on the lower leg. The current episode is from a week ago, the infected leg is warm, painfull with intense erythema. The Duplex ultrasonography of the right lower limb, presents extensive reactive lymphadenopathy in the inguinal region, an acute thrombotic process is excluded. The patient has been successfully treated with dual antibiotic therapy. After the discharge the patient is introduced with a prophylactic antibiotic treatment with benzathine benzil penicillin 1,2 ME every 2 weeks for at list a year. Five months follow up, no recurrence was observed.

**Key message:** This case emphasis the special care and attention in patients with chronic lymphoedema. Untreated chronic lymphoedema is progressive and leads to recurrent infection, disfigurement, physical disability and death in some cases. Treatment regardless etiology should include Decongestive Lymphatic Therapy (DLT) based on compression (bandaging, garments, intermittent pneumatic compression) therapy, movement exercises, manual lymphatic drainage, in addition to meticulous skin care, and education for risk reduction.

**Key words:** recurrent cellilitis, lymphoedema, elephantiasis

