



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

MYCETOMAS IN TUNISIA: A 41-YEAR RETROSPECTIVE STUDY

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Introduction: Mycetoma is a mutilating, chronic, granulomatous infection of the subcutaneous tissue of fungal (Eumycetoma), or bacterial (Actinomycetoma) origin. It is frequent in tropical and subtropical regions. It is, however, rare in Tunisia.

Objective: The purpose of the study was to outline the epidemiological, clinical, therapeutic and prognostic features of mycetomas in Tunisia.

Materials and Methods: We conducted a retrospective study of patients diagnosed with mycetoma in the Department of Dermatology, Charles Nicolle Hospital, Tunis from January 1976 to December 2017.

Results: Fifteen cases of mycetomas were enrolled, with a mean age of 33 years. Seven patients were males and eight were females. Ten patients were of rural origin. The mean duration was 12.6 years. The lesions were localized on the foot in 14 cases and on the face and perineum in 1 case. Grains were black in 4, white in 7 and yellow in 2 cases. In one patient, dermatoscopy of the foot revealed subclinical black grains. Microbiological examination identified the species in 10 cases. Fungal and bacterial culture revealed Actinomadura Madurae in 2 cases, Streptomyces Somaliensis in 2 cases, Madurella Mycetomatis in 4 cases and Pseudallescheria Boydii in 2 cases. Bone involvement was found in 10 cases. Eumycetomas were treated with ketoconazole (5 cases) and itraconazole case). The other cases were treated as actinomycetomas with antibiotic cotrimoxazole/amoxicillin in (cotrimoxazole/ampicillin in 4 cases, cotrimoxazole/dapsone in 1 case). Surgical excision was performed in 6 cases with amputation in 1 case. Outcome was favorable in 9 patients

Conclusions: Mycetomas are rare in Tunisia, and only observed sporadically. They are often unrecognized which explains the frequent delay of diagnosis and the resort to surgery which can be mutilating, with severe functional, psychological, and socioeconomic consequences. In early-stage forms, dermatoscopy can be of good assistance by revealing subclinical grains.





