



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

UNUSUAL MYCOBACTERIUM FORTUITUM SKIN INFECTION IN A COMPETITIVE FREEDIVER

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Background: Skin infections caused by atypical mycobacteria have become more frequent especially in immunocompromised patients, in which they usually cause disseminated nodular lesions; by contrast, a localized infection, usually after a trauma, has been described in healthy patients.

Observation: an otherwise healthy 35-year-old freediver presented with a history of a previous trauma on the right foot during a diving session in the Red Sea one year before, when he reached 90 mt depth. One month later, he started developing multiple cutaneous suppurative nodules on both legs, slowly remitting. At first, he was diagnosed with folliculitis, so underwent a therapy with macrolides, with poor improvement. Eventually, he presented to our attention with a persistent nodular lesion with central suppuration on the right leg. Drainage of the lesion was undertaken, but culture for bacteria and yeasts resulted negative. Afterwards, the nodule was biopsied, with histopathological examination showing a suppurative-granulomatous process occupying the entire dermis and part of the subcutaneous tissue, and cicatricial changes in the deep dermis. Multi-resistant *Mycobacterium fortuitum* was isolated from culture of the biopsy. Blood count, serum and urinary biochemistry, liver and haemolysis parameters, serology for HIV 1-2 were normal or negative. Chest X-ray showed no pulmonary lesions. He started a treatment with amikacin for 15 days, plus ethionamide and moxifloxacin for 40 days. By the end of the treatment, the patient experienced total regression of skin lesions without recurrence to the date, six months later.

Key message: It is important to include *M. Fortuitum* in the differential diagnosis of disseminated cutaneous infections that fail to respond to antibiotics. It remains unclear whether the freediving could have helped the pathogen spreading.

