



TROPICAL DERMATOLOGY

ACTINOMYCOSIS IN 12 YEARS OLD CHILDREN A CASE REPORT

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Background: Actinomycosis is a subacute-chronic bacterial infection characterized by granulomatous skin lesions, suppurative, forming multiple abscesses and sinuses that discharge sulfur granules. The bacteria causing these infections are Actinomyces species that are normal flora of the gastrointestinal, respiratory, and genitourinary track. Establishing actinomycosis diagnosis is difficult only by clinical symptoms, therefore many physicians are often missed diagnosis. Treatment of Actinomycosis is long term antibiotic for 6-12 months. For this reason it is important to perform laboratory, histopathology, and bacterial culture in order to make accurate diagnosis before giving the treatment.

Observation: A 12 years old woman come with multiple bumps in the buttock which spread and increase in number since she was 3 month old. The nodules often ruptured and then multiple discharge like pus were appeared. It has no pain, no fever, and no itch. Physical examination on gluteal region show multiple erythematous nodules, some of them were hyperpigmented, multiple sinuses were also found around it which discharge a mucopurulent discharge. The patients were diagnosed with actinomycosis base on clinical and histopathology examination.

Discussion: The diagnosis of actinomycosis is difficult to determine only by clinical symptoms. Complete history taking, physical examination and histopathology examination is needed to establish accurate diagnosis. The patients initially diagnosed with tuberculosis cutis based on skin biopsy results, but the other supporting examination such as thorax xray is normal, the Mantoux test is negative, and no acid-fast bacilli on histopathologic examination, swab of the pus, and bacterial culture, so that the diagnosis of tuberculosis cutis can be eliminated. Further histopathological examination with periodic acid shift stain show foamy macrophage, lymphocyte, hystiocyte, neutrophyl, dan eosinophyl surrounding amorf bodies with sulphure granules that support actinomycosis infection.

