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

NON-TUBERCULAR INFECTIVE CAUSES OF DISCHARGING SINUSES: AN INSTITUTIONAL EXPERIENCE FROM WESTERN INDIA

Farzana Ansari [1]

Aiims, Dermatology, Jodhpur, India [1]

Introduction: Mycetoma is a chronic suppurative granulomatous disease seen in tropical and subtropical areas. It involves subcutaneous tissue, skin and bones, and characterized by a triad of localized swelling, underlying sinus tracts, and production of grains or granules. Clinical studies on mycetoma are lacking in Indian literature that prompted us to study mycetoma in detail in our setup.

Objective: To see the burden of mycetoma, causative species, clinico-patho-microbiological correlation in our setup.

Materials and methods: Retrospective analysis of case records of patients with discharging sinuses, seen in dermatology out-patient department from January 2016 to December 2018 was performed. A diagnosis of mycetoma was primarily made on the basis of clinical features with additional evidence on histopathological and/or microbiological studies.

Results: Overall 40 patients were retrieved, who had mycetoma as one of the differential diagnosis. Out of the above, 15 fit the classic clinical triad of mycetoma with a mean age of 34.2 years(14-48 years), male to female ratio was 2.75. Histopathological findings revealed suppurative granuloma in 12 cases with grains found in 7 cases (Gomori-methanamine silver positive: 6, PAS positive: 7 cases). KOH mount from discharge showed acute angle branching fungal hyphae in 4 cases. Fungal culture grew Fusarium sp in 1 cases, Madurella mycetomatis in 1 cases, Aspergillus flavus in 1, Aspergillus nidulans in 1 case. Histopathology was suggestive of actinomycetoma in 2 cases. One case was of systemic mycoses but had discharging sinuses and fungal culture of this case grew Medicopsis romeroi species.

Conclusion: Our series revealed that eumycetoma is much more common in our setup as compared to actinomycetoma (6:1). Histopathologic findings were more sensitive in reaching a diagnosis of mycetoma as compared to culture studies, probably owing to inherent difficulties in culture methods.