

Mycobacterium marinum infection acquired from a domestic aquarium

Beatrice Tonin*; Roberta Catenaro; Paolo Gisondi; Giampiero Girolomoni

***Corresponding Author: Beatrice Tonin**

Department of Medicine, Section of Dermatology, University of Verona, Italy

Email: beatrice.tonin18@gmail.com

Clinical Image Description

An immunocompetent Caucasian 57-year-old man presented with a 4-month history of two painless erythematous-purplish ulcerative nodular lesions on the wrist and on the first finger of the left hand (Figure 1 and 2). There was no regional lymphadenopathy nor fever. Patient worked as a metal worker and had an aquarium at home that he periodically cleaned without gloves. He had already been treated by his general practitioner with systemic and topical antibiotic therapy (oral amoxicillin 1000 mg three times per day and mupirocin ointment twice a day for 10 days) with no improvement. Therefore, a skin biopsy of the wrist lesion was performed. Histopathological examination showed dermal granulomatous inflammation with lymphocytes, histiocytes, plasma cells and rare giant cells. Culture from the biopsy site revealed the presence of atypical acid-fast bacilli later identified as *Mycobacterium marinum*. Doxycycline 100 mg orally twice daily for three months was given, with gradual healing of the lesions.

Mycobacterium Marinum skin infection is a rare condition due to contact of non-intact skin with contaminated water or infected aquatic animals. Treatment of noninvasive infections includes tetracyclines, sulfamethoxazole–trimethoprim, clarithromycin, ethambutol or rifampin for at least three to four months. Clinicians should be aware of this contact zoonosis occurring particularly in risk groups such as ornamental fish hobbyists.



Figure 1: Erythematous-purplish nodular lesions with sporotrichoid distribution.



Figure 2: A detail of the ulcerative lesion on the thumb.

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Authors Information: Beatrice Tonin*; Roberta Catenaro; Paolo Gisondi; Giampiero Girolomoni
Department of Medicine, Section of Dermatology, University of Verona, Italy

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