

SPONTANEOUS REMISSION OF PRIMARY CUTANEOUS NOCARDIOSIS

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Nocardia brasiliensis involves the skin and subcutaneous tissue often. We report spontaneous remission of a case of primary cutaneous nocardiosis for its rarity.

Key Word: Nocardiosis

Introduction

Infection caused by *Nocardia* organisms are increasing in number.¹ Two species of *Nocardia* namely *No. asteroides* and *No. brasiliensis* play a major pathogenic role. *No. asteroides* is capable of producing a spectrum of illness involving the pulmonary system, central nervous system, and disseminated form of nocardiosis. However, *No. brasiliensis* frequently involves the skin and subcutaneous tissue.²

We report spontaneous healing of primary cutaneous nocardiosis in a 22-year-old man.

Case Report

A 22-year-old man, agriculturist, developed skin lesions 5 years ago. To start with, the lesion was small and there was redness, oozing, and crusting. Examination revealed a linear plaque with surrounding hyperpigmentation measuring 10 cm x 4 cm on the right shin. There were no other lesions present elsewhere on the body. The

haemogram, urine analysis, and chest X-ray were normal. There was no associated fever. Culture for pyogenic organisms from these lesions was sterile. A provisional diagnosis of sporotrichosis was made. The tissue was sent for fungus culture and histopathological examination. Biopsy was non-contributory, while the culture on Sabouraud's dextrose agar grew *No. brasiliensis*, which was confirmed by biochemical reactions. After 4 weeks the lesions resolved with hyperpigmentation.

Comments

Pustules, cellulitis, pyoderma, and lymphocutaneous form of nocardiosis are encountered.³ The lymphocutaneous or sporotrichoid form of infection is an unusual form of cutaneous nocardiosis.⁴ Starting as a local pyodermatous lesion, spreading in a linear fashion as seen in our case, mimicking the lymphocutaneous disease of *Sporothrix schenckii*. Most cases of cutaneous nocardial infection are associated with a predisposing condition of trivial injury, most commonly seen in gardeners.

Culture of the tissue is confirmatory as lymphocutaneous nocardiosis resembles sporotrichum infection. *Nocardia* organisms are susceptible to sulfonamide therapy.

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However in our case, sulfonamide therapy was not given as sporotrichosis was suspected. Spontaneous remission is known in sporotrichosis⁵ but rarely reported in nocardiosis. Immune-competence may play a role in spontaneous healing, as seen in our patient.

References

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ANNOUNCEMENT

The Publication of the IADVL Textbook and Atlas of Dermatoglogy has been delayed by 2 months. It will be published very shortly. Hence the last date for receiving the orders at the prepublication discounted price of Rs 1,980/- has been extended upto 31.5.1993. The order may be sent to :

Bhalani Medical House,
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