

Case Report

Cutaneous *Paecilomyces lilacinus* infections in immunocompromised and immunocompetent patients

Shahindokht Bassiri-Jahromi

Department of Medical Mycology, Pasteur Institute of Iran, Tehran, Iran

Address for correspondence: Shahindokht Bassiri-Jahromi, Department of Medical Mycology, Pasteur Institute of Iran, Pasteur Street, No. 69, Tehran, Iran.
E-mail: basiri@pasteur.ac.ir

ABSTRACT

Paecilomyces is a genus of saprophytic fungus that has been associated, in rare instances, with human disease. We report two cases in which *Paecilomyces lilacinus* was isolated from cutaneous and subcutaneous lesions in an immunocompromised and an immunocompetent host. The first case was a subcutaneous infection due to *P. lilacinus* in a patient with a renal transplant and diabetes mellitus. The second case was an immunocompetent young woman who developed a cutaneous infection, with no identified predisposing factors. A biopsy from each patient provided an initial diagnosis of fungal elements in the tissues under examination and multiple positive fungal cultures were obtained from the tissue biopsy samples. Both microscopic and macroscopic examinations of the biopsy revealed the presence of *P. lilacinus*. Each of the two cases was successfully treated with oral ketoconazole (200 mg/day) and itraconazole. We also review previously reported cases in which the clinical history and response to therapy were noted.

Key words: Cutaneous infection, fungal infection, ketoconazole, *Paecilomyces* infection, treatment

INTRODUCTION

Paecilomyces is a hyaline hyphomycete that is prevalent worldwide.^[1] Although *Paecilomyces* spp. are relatively uncommon pathogens, they can cause serious infections in immunocompromised patients. The incidence of infections in immunocompetent hosts is also increasing.^[2]

Paecilomyces lilacinus has been reported to cause cutaneous infections including catheter-related fungemia, sinusitis,^[3] dermatitis, and disseminated disease secondary to application of a contaminated skin

lotion in immunocompromised patients.^[4] *P. lilacinus* and *P. variotii* are the two species most frequently associated with human disease. Other species occasionally associated with human infections are *P. marquandii*^[5,6] and *P. javanicus*.^[7] *P. lilacinus* can cause many diseases in humans especially in immunocompromised patients. Cutaneous infections are the second most common type of *Paecilomyces*-related infection.^[8]

CASE REPORTS

Case 1

The patient was a 78-year-old woman with a history of insulin-dependent diabetes mellitus who had previously been diagnosed with chronic renal failure and had undergone a renal transplantation two months prior to the onset of symptoms related to *Paecilomyces* infection. The patient was admitted with pruritic, erythematous, and edematous subcutaneous nodules on her left hand along with high spiking fever and tender axillary lymphadenopathy for 28

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