Dermatology Quiz

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A 36-year- old male presented with a history of nodules on the face for 3 months. He is HIV positive with a CD4 count of 92 cells/mm3. The patient has not yet been receiving anti-retroviral therapy. On clinical examination he was emaciated, had generalised lymphadenopathy and oral thrush. He had several nodular lesions on the face. These lesions bled easily on contact (Figure 1). Biopsy from one of the nodules showed an atrophic epidermis, proliferation of capillaries in the dermis and an inflammatory infiltrate of lymphocytes, histiocytes and neutrophils (Figure 2)



Figure 1

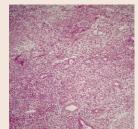


Figure 2

Warthin-Starry stain showed clumps of bacilli around blood vessels. Electron microscopy showed bacilli which appeared as pleomorphic structures with a trilaminar wall and a coarsely granular cytoplasm (Fig. 3).

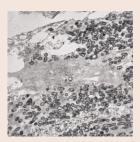


Figure 3

Questions

- 1. What is the diagnosis?
- 2. What is the aetiology and pathogenesis?

- 3. Is this condition associated with HIV and immunosuppression?
- 4. What treatment would you prescribe for the patient?

Treatment is erythromycin 500mg per os (qid) for up to 8 weeks. Other drugs which can be used are doxycyclin, darithromycin, azithromycin and co-trimoxazole. Prognosis is usually good if treated early with appropriate ani

Diagnosis is confirmed by biopsy, A Warthin-Starry stain has to be done to demonstrate the bactleria. Electron microscopy is the gold standard as it can easily demonstrate the bacilli.

The diagnosis is bacillary angiomatosis, a vasculoproliferative bacterial infection characterised by vascular lesions resembling pyogenic granulomas. It is caused by gram negative bacilli, by vascular lesions each Bartonella quintana. So far, cases of bacillary angiomatosis have only been reported in the setting of AIDS and other forms of severe immunosuppression. Only been reported in the setting of AIDS and other forms of severe immunosuppression. Lesions are usually reddish-brown nodules which bleed easily on contact. Lesions may also be ulcerations and fungating tumours. The disease can disseminate to involve visceral organs.

Answers