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【 PICTURES IN CLINICAL MEDICINE 】

Advanced Ecthyma Gangrenosum with *Pseudomonas aeruginosa*

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Key words: ecthyma gangrenosum, necrosis, infection, *Pseudomonas aeruginosa*, bacteria

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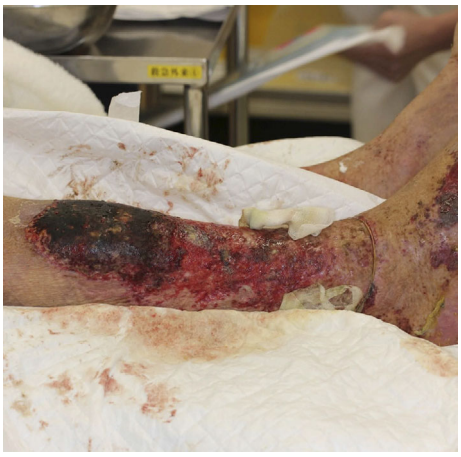
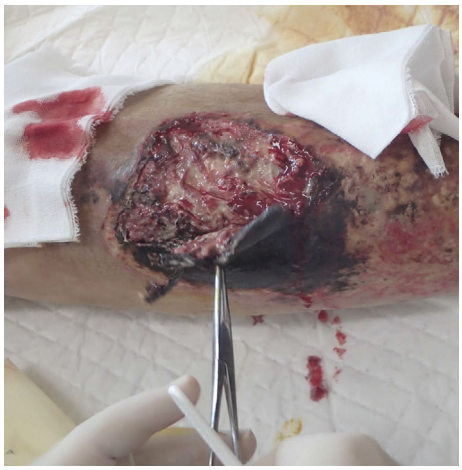


Picture 1.



Picture 2.

A 72-year-old man with fatigue, fever, and hypotension was hospitalized with stasis dermatitis and black ulcers on both the legs. Necrosis had developed several days before admission (Picture 1). He was taking sunitinib for renal cancer.

Gram-negative rods were identified in the wound exudate on gram staining; thus, Piperacillin/Tazobactam was administered. He was admitted to the intensive care unit (ICU) because he developed septic shock due to the soft tissue infection. Blood culture was negative. Wound debridement was performed (Picture 2). *Pseudomonas aeruginosa* was identified by wound exudate culture. He was discharged from the ICU on Day 12 following improvement.

Ecthyma gangrenosum (EG), an uncommon disease, is a soft tissue infection with necrotic ulcers and eschar. The most frequently implicated pathogen in EG is *Pseudomonas aeruginosa* (>70%), with sepsis occurring in 58% of cases (1). Early detection can enable prompt debridement, effective antibiotic therapy, and a good prognosis.

The authors state that they have no Conflict of Interest (COI).

Reference

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