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Ecthyma: A Diagnosis to Keep in Mind

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Ecthyma is a deep/ulcerative type of pyoderma, associated with poor hygiene conditions and social poverty. Unlike impetigo, in which the erosion is limited to the *stratum corneum*, ecthyma affects the full thickness of the skin, healing with scarring.

We present the case of a 6 year-old girl with a 10-day history of cutaneous, pruritic, ulcerated lesions with raised margins. The lesions presented initially in the lower limbs (Fig. 1), but progression to the abdomen, trunk (Fig. 2), and lower jaw was noted. The lesions developed a black crust and, later on, a yellowish exudate, while growing in size (maximum 5 x 4 cm) and number. Notably, the girl was in Guinea-Bissau when the lesions began to appear. She was started on intravenous flucloxacillin and gentamicin. Cultures of the exudate revealed a mixed growth of *Streptococcus pyogenes* and methicillin-sensible *Staphylococcus aureus* supporting the clinical diagnosis of ecthyma. Progressive resolution of the lesions was noted over a 21-day course of flucloxacillin. A one-year follow-up

Figure 1. The ecthyma lesions on the girl's lower limbs.

revealed the resolution of the lesions, while maintaining residual scarring on the sites of the larger lesions.

Ecthyma is a relatively common disease in children that may mimic other cutaneous infections, especially in travelers. It requires early diagnosis and appropriate systemic antibiotics in order to avoid long-term complications like scarring and associated psychological complications.¹⁻⁴

Keywords: Child; Ecthyma/diagnosis; Ecthyma/drug therapy

WHAT THIS REPORT ADDS

- Ecthyma is a frequent ulcerative skin infection caused by group A beta-hemolytic *Streptococcus*. However, concomitant *Staphylococcus aureus* is often isolated from skin lesions.
- Ecthyma may mimic zoonotic infections, especially in returning travelers.
- Early recognition and systemic antibiotics are required to prevent complications.
- Healing occurs slowly, frequently with scarring.



Figure 2. The ecthyma lesions on the girl's trunk.

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Confidentiality of data

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References

- 1. Hochedez P, Canestri A, Lecso M, Valin N, Bricaire F, Caumes E. Skin and soft tissue infections in returning travelers. Am J Trop Med Hyg 2009;80:431-4.
- 2. Morelli JG. Ecthyma. In: Kliegman RM, Stanton BF, Geme JW, Schor NF, Behrman RE, editors. Nelson textbook of pediatrics. 19th ed. Philadelphia: Elsevier Saunders; 2011. p.3554-55.
- 3. Orbuch DE, Kim RH, Cohen DE. Ecthyma: A potential mimicker of zoonotic infections in a returning traveler. Int J Infect Dis 2014;29:178-80. doi: 10.1016/j.ijid.2014.08.014.
- 4. Paller AS, Mancini AJ. Bacterial, mycobacterial and protozoan infections of the skin. In: Paller AS, Mancini AJ, editors. Hurwitz clinical pediatric dermatology, 4th ed. Philadelphia: Elsevier Saunders; 2011. p.324-30.