Case of bloodstream infection by Granulicatella adjacens and Candida lusitaniae in a patient with neutropenic fever

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Systemic infection due to Granulicatella (formerly Abiotrophia), a species of nutrition-deficient gram-positive cocci, is rare. Candida lusitaniae is also known as a rare cause of fungemia, but recently it has been identified as an emerging nosocomial pathogen, particularly in immunocompromised patients. We present a case of bloodstream infection by Granulicatella adjacens and Candida lusitaniae in a 65-year-old man diagnosed with relapsed acute myeloid leukemia. On day 10, neutropenia developed, and on day 13 empirical antibiotic was started for neutropenic fever. Both organisms were isolated by blood culture during the neutropenic phase. He recovered successfully after treatment with meropenem, vancomycin, amphotericin B, and caspofungin. Antibiotics and antifungal susceptibility testing of both organisms revealed sensitivity to all tested agents. When isolated from a patient with neutropenic fever, both Granulicatella adjacens and Candida lusitaniae should be considered an opportunistic pathogen. Difficulties of the treatment with Granulicatella adjacens due to its slow and fastidious growth characteristics and its increased resistance and tolerance to antibiotics should be aware. Though initial susceptibility testing of Candida lusitaniae shows sensitivity to amphotericin B, poor clinical response may indicate changing antifungal agent to azole or echinocandin agent.

A case of eosinophilia by scabies skin infection in sanitorium female patient

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Eosinophilia is the presence of >500/uL of peripheral blood and common cause are parasite infection, allergic reaction to drug, and allergic disorder. Eosinophilia in excess of 1500/uL persisting for longer than 6 months with idiopathic etiology and organ involvement is termed idiopathic hypereosinophilic syndrome and this entities need to treatment. Scabies is one of medically important arthropods. They are recently wide outbreaks in socially disadventages population and local sanitorium in Korea. A 82 years old female had been admitted sanitorium and she was complained for severe itching sensation with multiple popular skin lesion in axillar, buttock, interdigital area and gradually, increased eosinophil count upto 4900/uL preceding 2month duration. Parasite and allergen exam was all negative and there was not history of new drug and herb medication. The patient performed skin biopsy and we diagnosed eosinophilia with scabies skin infection and treated by only topical agent such as lindane, eosinophilia, itching sensation and skin lesion was improved. Here we present a case of rare cause hypereosinophilia by scabies skin infection, and successful treatment only using topical agent.