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Image in medicine

## Pretibial skin lesions in a patient with HIV infection

## Lesiones cutáneas pretibiales en paciente con infección por VIH

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Fig. 1.



Fig. 2.

A 60-year-old woman, originally from Equatorial Guinea, was admitted due to asthenia, anorexia and unquantified weight loss of months of evolution. She had a history of HIV infection, diagnosed 8 years earlier, on treatment with tenofovir/emtricitabine and lopinavir/ritonavir. On admission, she had 550 CD4+lymphocytes and a viral load of 61 copies/ $\mu$ L. Based on a lymphocyte pleural exudate with high ADA (83 IU/L), pleural tuberculosis was diagnosed.

Likewise, the presence of bilateral papule-pustular skin lesions in the pretibial region, approximately 1 cm in diameter, not pruritic or painful, was observed for months of evolution (Fig. 1). She denied exposure to animals or previous trauma on the area. Biopsy of the lesions revealed an acute abscessed inflammatory infiltrate. Blood cultures were negative.

The culture of the skin biopsy yielded *Listeria monocytogenes* serotype 1 (Fig. 2). Treatment was started with cotrimoxazole 160/800 mg/12 h orally for 21 days. At 9 months the lesions had diminished in size disappearing almost completely.

Cutaneous listeriosis is a rare disease (up to 2013, 24 cases of cutaneous listeriosis had been described) with two forms of presentation, primary and secondary. Primary cutaneous listeriosis (PCL) frequently appears in healthy people in contact with animals or vegetation (typically farmers or veterinarians) by direct skin inoculation. They are self-limited. Secondary cutaneous listeriosis (SCL) is the result of hematogenous spread, always in immunosuppressed patients.

In most PCL, lesions return spontaneously, so the role of antibiotic treatment is not well established. In our case, given the suspicion of SCL, we decided to administer treatment with cotrimoxazole for 21 days.

Cutaneous lesions in HIV-infected patients can be due to an infection. Biopsy and sample cultures are compulsory to reach an appropriate diagnosis.

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