AN OPPORTUNISTIC MUCO-CUTANEOUS INFECTION WITH NONTUBERCULOUS MYCOBACTERIA DURING ADALIMUMAB TREATMENT

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INTRODUCTION

Adalimumab is a tumor necrosis factor-alpha (TNF-α) used for refractory non-infectious uveitis in children. Anti-TNF therapy has been be associated with opportunistic infections, such as atypical mycobacteriosis.

CASE REPORT

12-year-old

Idiopathic Uveitis (anterior and intermediate)

20 months remission on:
  - Adalimumab
  - Cyclosporine

4 months

Nodular, erythematous vegetative lesions
Nasal mucosa, palate and foot

Giant cells non-necrotic granuloma

Mycobacterium marinum
PCR and culture positive (no susceptibility)

Also HSV-1 PCR positive nasal septum, palate

Although rare, atypical mycobacteria infections in patients taking TNF-α inhibitors have been reported in the literature. The diagnosis of Mycobacterium marinum infection is difficult and requires a high degree of suspicion. Treatment is challenging and usually includes clarithromycin combined with rifampicin or ethambutol for at least 2 months after disease regression. The multifocal mucous involvement is to our knowledge not previously reported and the authors wonder if treatment or prophylaxis should be maintained longer to prevent relapses in a patient who remains under immunosuppression.

REFERENCES