

PHAEOHYPHOMYCOSIS, ASPERGILLOSIS AND MYCOBACTERIOSIS  
IN A RENAL TRANSPLANT PATIENT:  
THE IMPORTANCE OF PURSUING AN ETIOLOGY FOR NEW SYMPTOMS

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**Abstract: INTRODUCTION:** Phaeohyphomycosis is increasingly recognized as a cause of infection in the immunocompromised host. Both cutaneous and pulmonary presentations have been reported. We recently treated a renal transplant patient with cutaneous phaeohyphomycosis caused by *Alternaria* species in whom subsequent pulmonary pathology was attributable to combined infection with *Aspergillus* sp. and *Mycobacterium* sp.

**CASE REPORT:** The patient initially presented with an indolent, granulomatous infection of her finger. Histopathology and culture confirmed infection with *Alternaria* sp. She was begun on oral itraconazole. Although the skin lesion improved over the next weeks, she began to develop pulmonary symptoms and a new infiltrate on chest x-ray. Samples taken from bronchoscopy grew *Mycobacterium* sp. and *Aspergillus* sp.

**CONCLUSIONS:** While alternariosis can rarely present as pulmonary infection, other opportunistic infections such as TB or aspergillosis should be suspected in immunocompromised patients who present with pulmonary symptoms. Concomitant anti-fungal anti-tuberculous treatment may be complicated by drug interactions.