

AZOLE TREATMENT OF TWO UNUSUAL PATHOGENS

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We report on voriconazole therapy in two immunosuppressed patients, one with a phaeohyphomycosis soft tissue infection and the other with a *Fusarium* cutaneous infection.

The first patient, a long surviving renal transplant recipient, presented to general medicine clinic with a soft tissue swelling in the carpal-metacarpal area of the thumb. The presumptive clinical diagnosis was a ganglion cyst and the patient had surgery to remove the swelling. Pathologic examination of the surgical specimen reported hyphael elements, and the patient was referred to infectious diseases clinic where cultures were obtained. An extensive literature search suggested a role for empiric voriconazole therapy and it was started. After a minimally favorable local response the area was further surgically debrided. Both clinic and surgery specimens on several growth medias grew a phaeohyphomycosis thought to be a *Phoma* species. Samples were sent to a reference laboratory for assistance with identification. The patient remains well on voriconazole treatment and all signs of local infection have resolved.

The second patient had a history of reactive airways disease requiring long standing systemic steroid therapy and was hospitalized with extensive left upper extremity disease consisting of numerous erythematous, violaceous 0.5 to 2 cm² nodular lesions. Multiple cultures grew *Fusarium* species. Careful clinical evaluation did not show evidence of distant metastasis. A literature search and review suggested voriconazole might be effective and it was begun. Clinical follow up through 6 weeks of therapy shows resolution of most lesions and continued improvement of remaining lesions.

These two immunosuppressed patients demonstrated good clinical response with voriconazole, which was well tolerated. Both had soft tissue infections that improved with this novel orally available therapy.