

P5

ASPERGILLUS FUMIGATUS CUTANEOUS INFECTION ON A HOME-MADE TATTOO

Nicolas Kluger¹, Kari Saarinen¹.

¹*Departments of Dermatology, Allergology and Venereology, Institute of Clinical Medicine, University; (Helsinki, Finland).*

Fungal and parasitic infections on tattoos are exceptional. They occur in case of lack of asepsis and hygiene during the procedure or the aftercare. We report the first case of primary cutaneous aspergillosis (PCA) in an immunocompetent patient after home-tattooing.

Case report: A 24 – year old healthy Finnish man was referred for a painful rash on a large black tattoo of the back that was performed at his home by a tattooist friend. A couple of weeks after, the tattoo was covered by painful purpuric necrotic papules and pustules evolving into crusts. He had no fever and physical examination was unremarkable otherwise. Laboratory tests disclosed hyperleucocytosis (20 800/mm³), elevated CRP (80 mg/mL) and hepatitis (ALAT 205 UI/mL). HIV, HBV, HCV, HSV and VZV infections were ruled out. Histology was non specific (acanthosis, dermal infiltration of lymphocytes and eosinophils). Periodic acid schiff and Giemsa staining were negative. *Aspergillus fumigatus* was isolated and identified in fungal cultures from the biopsy. Oral voriconazole was initiated in combination with local terbinafine and resulted in healing of the lesions 4 weeks after initiation of the treatment. Surgical revision of the necrotic tissue was performed. The tattooist vanished and neither material or ink could be recovered for analysis.

Discussion: *Aspergillus* is an ubiquitous saprophytic fungus that is common in soil, water and decaying vegetation. Inoculation may have occurred during the procedure (contaminated instruments or ink) or during the healing phase. Our case illustrates that severe and atypical infection may occur if tattooing is not performed with respect strict rules or hygiene and asepsis in a tattoo parlour. Backyard tattooists should be avoided.