

WOUNDS CAUSED BY MICROORGANISMS IN WESTERN EUROPESeverin Läubli*Dermatological Clinic, University Hospital Zürich, Zürich, Switzerland*

Whereas many skin infections can result in ulcerations, e.g. bullous impetigo, chronic wounds due to infectious organisms are rare in Western Europe. However, in certain patient populations there must be a raised level of suspicion to infectious causes of wounds.

Ecthymata are often multiple skin ulcers with a punched-out appearance that are due to streptococcal and rarely staphylococcal toxins and which usually appear in IV-drug-users and patients living in desolate hygienic conditions. Leishmaniasis is a protozoal infection that is endemic in some Mediterranean countries as well as large parts of Africa and Asia. In the growing population of immunosuppressed patients, e.g. organ transplant recipients or HIV-patients, many pathogens that usually do not cause ulcerations can lead to chronic wounds. These include, amongst others, atypical mycobacterial infections, herpes virus, protozoal and deep fungal infections. Furthermore, infectious ulcers can occur in otherwise healthy patients who return from tropical countries.

Diagnosis of infectious causes of chronic wounds can in some cases, such as ecthymata, be made by taking a careful history and microbiological cultures from wound swabs. Many wounds will however require culture from tissue biopsies and histological analysis with special stains. Treatment is usually straightforward with systemic antibiotic, antiviral or antifungal medication in combination with local anti-infective measures.

In summary, infectious causes of chronic wounds in Western Europe should be excluded in the absence of a vascular cause of an ulcer especially in certain patient populations such as young patients with ulcers, IV-drug-users, immunosuppressed patients and those returning from tropical countries.