



Disseminated cutaneous histoplasmosis: A bedside diagnosis

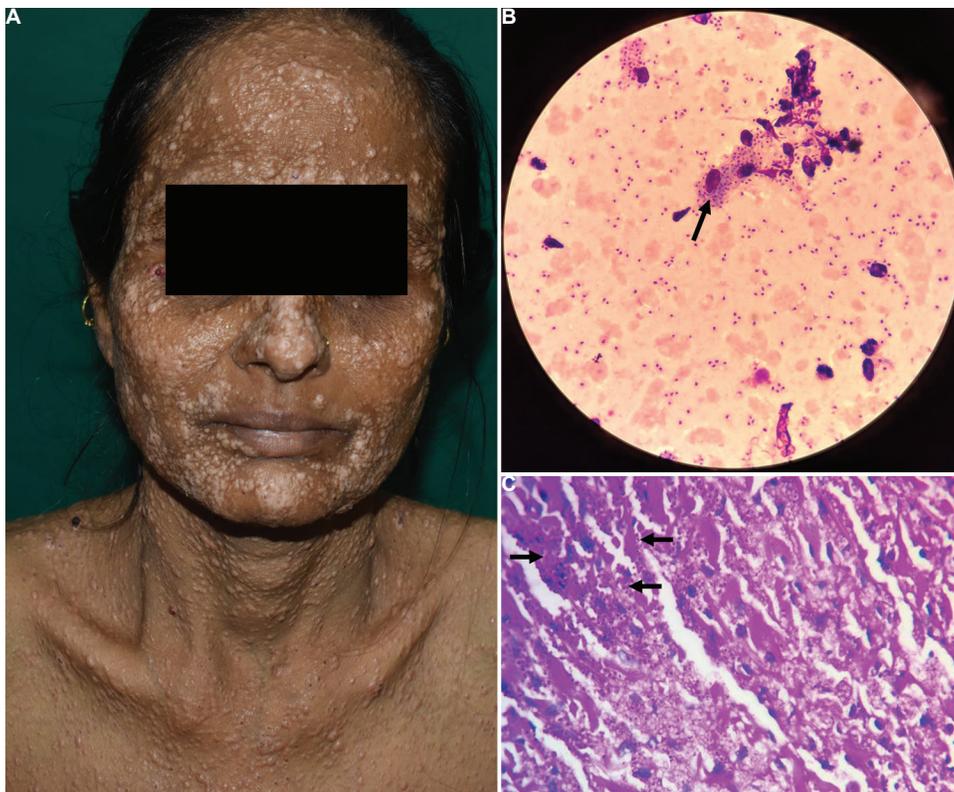


Figure. (A) Young adult retropositive female with multiple skin-coloured umbilicated papulonodules. (B) Tissue smear showing intracellular inclusions with pseudocapsule and differential staining (black arrow) suggestive of histoplasmosis. (C) Multiple histoplasma spores within histiocytes on histopathology of cutaneous nodules (black arrows, H and E, $\times 400$).

A newly diagnosed 35 yr old retropositive female[†] presented to the department of Dermatology and Venereology, All India Institute of Medical Sciences, New Delhi, India, in October 2019, with sudden onset generalized involvement in the form of skin-coloured papulo-nodules with central umbilication and crusting (Figure A), after about 20 days of starting antiretroviral

therapy. Bedside test done on outpatient basis in the form of tissue smear from the cutaneous nodule revealed mononuclear cells filled with intracellular bodies with differential staining, suggestive of histoplasmosis (Figure B), which was confirmed on cutaneous biopsy for histopathological examination (Figure C). The patient responded dramatically to

[†]Patient's consent obtained to publish clinical information and images.

liposomal amphotericin B given for two weeks, and was continued on daily itraconazole 400 mg BD for 1.5 yrs with complete resolution of skin lesions. This case demonstrates the utility of a simple bedside test amenable to use in peripheral settings in diagnosing such conditions.

Conflicts of Interest: None.

Ananya Sharma & Somesh Gupta*
Department of Dermatology & Venereology,
All India Institute of Medical Sciences,
New Delhi 110 029, India

**For correspondence:*
someshgupta@hotmail.com

Received November 20, 2019