

Clinical Image

Open Access, Volume 3

Beware of anaerobe - atopobium species causing extensive osteomyelitis of hand**Anmol Khanna^{1*}; Sandeep B¹; Debesh Rimal^{2,3}**¹Royal Perth Hospital, Australia.²Rockingham hospital, Australia.³Fiona Stanley hospital, Australia.***Corresponding Author: Anmol Khanna**

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Received: Feb 26, 2022

Accepted: Mar 25, 2022

Published: Apr 01, 2022

Archived: www.jcimcr.org

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DOI: www.doi.org/10.52768/2766-7820/1770

Keywords: Atopobium species; Hand.**Description**

Osteomyelitis of the hand is uncommon, but if not adequately and promptly treated the detrimentally effects can be devastating. This is particularly important for hand infections caused by anaerobic bacteria that are more frequently recognised in recent years due to improvements in bacterial isolation.

We treated a 46-year-old with past medical history of chronic kidney disease, peripheral vascular disease and diabetes type 2. He was discharged a month earlier from a different hospital after a left ring finger infection with tenosynovitis that extended into the palmar space. His 4th finger was amputated at MCP level. Tissue MC & S grew MSSA and Atobium species. He was treated with 2 weeks of IV flucloxacillin and discharged with 4 weeks for gram positive sensitive oral antibiotics. X-ray conducted at our unit demonstrated extensive erosive arthropathy. He further underwent an MRI that demonstrated extensive bony, joint and soft tissue infection.

Atopobium species are Gram-positive, anaerobic, catalase-negative, fastidious bacteria belonging to the family Corio-

bacteriaceae. *Atopobium* species are found in human gingival crevices and rarely have been described in various human infections, including dental abscesses, abdominal wound infections, pelvic abscesses, and bacteremia. This case highlights the importance of treating an anaerobe when managing a patient the hand infection.

Relevant image: X-ray: erosive arthropathy along the left wrist joint and carpometacarpal joints.

MRI: Extensive bony, joint and soft tissue infection.



Figure 1: X-ray Erosive arthropathy along the left wrist joint and carpometacarpal joints.



Figure 2: MRI: Extensive bony, joint and soft tissue infection.

