



IMAGES IN INTENSIVE MEDICINE

Eczema herpeticum in a burned patient: Skin grafting failure and tracheobronchitis

Eccema herpético en un paciente quemado: fracaso del injerto de piel y traqueobronquitis

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Available online 5 March 2024

A 56-year-old man with extensive thermal burns received escharotomy and split-thickness skin grafting (STSG). Numerous punched-out ulcers with confluence developed on the donor sites of STSG and burn wounds on his face, neck, and trunk (Figs. 1 and 2) 5 days following surgery. Multinucleated giant cells were present in Tzanck smear (Fig. 3) and herpes simplex virus (HSV) was identified by polymerase chain reaction from the ulcers. Anti-varicella zoster virus immunoglobulin (Ig)M antibody examination was negative. We diagnosed eczema herpeticum and administered intravenous acyclovir (500 mg every 8 h). Although the ulcers gradually healed after 1-month antiviral treatment, HSV tracheobronchitis and skin graft failure developed subsequently. Eczema herpeticum can cause delay wound healing, viremia, sepsis, multiple-organ failure, and mortality in burn patients.

DOI of original article: <https://doi.org/10.1016/j.medin.2024.02.002>

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<https://doi.org/10.1016/j.medine.2024.02.007>

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Figure 1



Figure 2

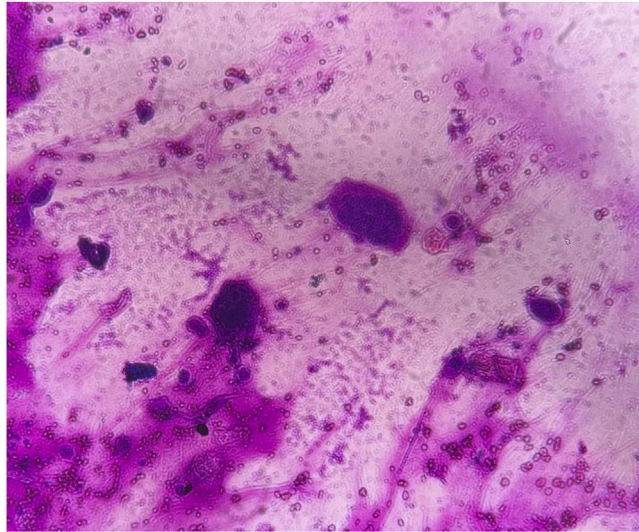


Figure 3

Funding sources

None declared.

Competing interest statement

None declared.

Statement on contributorship and the guarantor

All authors substantially contributed to the planning, drafting/revising and final approval of the article. Dr. Chen was responsible for the overall content as guarantor.

Declaration of patient consent

The authors affirm that human research participants provided informed consent for publication of the images. The participant's wife has consented to the submission of the case report to the journal. Patient's wife signed informed consent regarding publishing their data and photographs.

Institutional review board approval

This study was waived by the Chang Gung Medical Foundation Institutional Review Board.

Declaration of generative AI in scientific writing

None.

Acknowledgment

None.