

## Pulmonary Phaeohyphomycosis in Retroviral Disease Patient

Ummu Afeera Binti Zainulabid<sup>1</sup>, Muhammad Naimuddin Bin Abdul Azih<sup>1</sup>, Sasi Kumar A/L Maniyam<sup>1</sup>, Azliana Binti Abd. Fuua<sup>2</sup>, Mohd Radhwan bin Abidin<sup>3</sup>, Hajar Fauzan Bin Ahmad<sup>4</sup>

### **Abstract**

Pulmonary phaeohyphomycosis is a rare infection in the lung caused by black fungi containing a cytoplasmic melanin-like pigment. A 42-year-old man with underlying retroviral disease on HAART was investigated for having constitutional symptoms. Despite undetectable viral load and a high CD4 count, he was found to have unexplained significant loss of weight and appetite over a period of 6 months. Clinical examination revealed a cachexic man with multiple inguinal lymphadenopathies. Excisional biopsy of the inguinal lymph node revealed reactive follicular hyperplasia. CT Thorax, Abdomen and Pelvis was arranged to look for occult malignancy or infection and he was found to have multiple non-enhancing subcentimeter lung nodules mainly at the lateral segment of the right middle lobe of his lung. The largest nodule measured about 0.8 x 1.5 x 0.5 (AP x W x CC), with some nodules having an irregular margin with no extension into the adjacent bronchi. Bronchoscopy was done and demonstrated a black patch at the right intermedius, lateral segment of the middle lobe which did not disappear upon bronchial flush or wash. Histopathological examination found focal areas of blackish pigment and the bronchial alveolar lavage sent for fungal culture grew *Cladosporium* species. The patient was treated with oral Itraconazole with marked clinical improvement. This case highlights an unusual black fungi infection in the lung that stands out not only for its rarity and its responsiveness to treatment, but also the susceptibility of an RVD positive patient to this infection despite having suppressed viral load and normal CD4 count.

**Keywords:** Kounis Syndrome, acute coronary syndrome, anaphylactoid reaction, mast cell activation

DOI: <http://dx.doi.org/10.31344/ijhhs.v5i0-2.335>

- 
1. Internal medicine, Hospital Tuanku Ampuan Najihah, Malaysia
  2. Department of Pathology and Laboratory Medicine, Kulliyyah of Medicine, International Islamic University of Malaysia
  3. Department of Radiology, Kulliyyah of Medicine, International Islamic University of Malaysia
  4. Faculty of Industrial Sciences and Technology, Universiti Malaysia Pahang
-