Snapshot

Corynebacterium minutissimum infection: erythrasma

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A 68-year-old man presented with a 4-month history of mildly pruritic, well circumscribed, red-brown plaques with overlying scale affecting the axillary and inguinal regions (Figure, A). Wood lamp examination showed vivid coral pink fluorescence (Figure, B) suggestive of erythrasma. *Corynebacterium minutissimum* infection was confirmed through bacterial culture.

C. minutissimum is a gram-positive rod with a characteristic fluorescence attributable to synthesis of coproporphyrin III. General measures include optimising weight and glycaemic control where indicated. Treatment options include topical clindamycin, fusidic acid, azole antifungals or a 2-week course of a systemic macrolide or tetracycline antibiotic for generalised or recalcitrant cases.

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