IMAGES IN CLINICAL MEDICINE

Lindsey R. Baden, M.D., Editor

Herpetic Whitlow



PREVIOUSLY HEALTHY 18-YEAR-OLD WOMAN PRESENTED WITH A 2-WEEK history of fever, malaise, and a painful left middle finger. Physical examination revealed an area of erythematous, confluent vesicles on the middle phalanx of the finger and associated axillary lymphadenopathy. She was given a clinical diagnosis of superficial skin infection (erysipelas) and was started on a course of oral antibiotics. She returned 1 week later with persistent symptoms. She reported no history of similar oral or genital symptoms. Direct fluorescence antibody testing of vesicular fluid was performed and confirmed the presence of herpes simplex virus type 2 (HSV-2). Her initial constitutional symptoms of fever and malaise, hallmarks of primary HSV-2 infection, indicated that the infection was newly acquired. She received a diagnosis of herpetic whitlow and was treated with a 7-day course of oral acyclovir. At a 1-week follow-up visit, the patient's symptoms had improved. At a 2-year follow-up the patient reported having had several recurrences involving her finger, which required treatment with antiviral medication.

DOI: 10.1056/NEJMicm1311820 Copyright © 2014 Massachusetts Medical Society. Sara Izzo

University of Rome, Sapienza Rome, Italy

Muneer Ahmed, M.R.C.S.

King's College London London, United Kingdom muneer.ahmed@kcl.ac.uk

N ENGLJ MED 371;17 NEJM.ORG OCTOBER 23, 2014

e25

The New England Journal of Medicine

Downloaded from nejm.org by NICOLETTA TORTOLONE on October 22, 2014. For personal use only. No other uses without permission.

Copyright © 2014 Massachusetts Medical Society. All rights reserved.