Unusual Presentation of Actinomycosis in Oropharynx: A Case Report

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Actinomycosis is a rare infectious bacterial disease caused by Actinomyces species and is common among immunocompromised patients. A 56 years old patient, who was a carpenter in profession, was presented to ENT department with irritation and foreign body sensation in the throat for a period of two months. He was a diagnosed patient with diabetes mellitus. Throat examination showed white patches over the posterior pharyngeal wall and rest of the oral cavity was normal. Through the Fiberoptic laryngoscopy examination, whitish patches over the tongue base, posterior pharyngeal wall, and vallecular area were found. Lesions appeared as penetrating the mucosa and multiple samples were taken for culture and histology. Biopsy specimens taken from the lesions showed multiple basophilic spherical clusters of densely packed filaments suggestive of Actinomyces. Bacterial culture of specimens from the lesions were performed. The blood and chocolate agar plates showed a pure growth of whitish dry colonies after 72 hours of incubation in microaerophilic conditions. The isolate appeared as branching Gram-positive bacilli on Gram staining. These colonies were later identified as Actinomyces meyeri (remel : RapdID ANA11 positive rods) at the reference laboratory. Antibiotic sensitivity report showed susceptible to penicillin and co-amoxiclay. Patient was initially treated with intravenous (IV) penicillin for 5 days and later converted to IV co-amoxiclav and continued with oral co-amoxiclay for a total of 8 weeks. Fibro optic laryngoscopy examinations were initially done weekly to evaluate the response and showed complete recovery of lesions after 8 weeks of antibiotic treatment. Patient was asymptomatic at the end of the treatment and was followed up for 6 months in the clinic and no recurrence was observed.

Keywords: Actinomycosis, oropharyngeal, actinomyces, microbiota