

## Nails Changes Induced by Daptomycin

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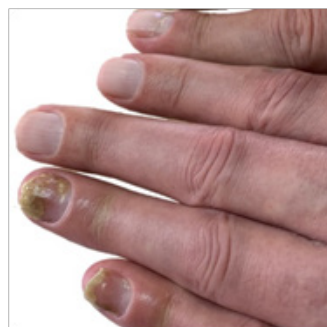
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### 1. Clinical Image

A 47-year-old male patient, with a newly diagnosed liver cirrhosis and chronic pancreatitis, had a prolonged hospitalization at the Internal Medicine Department due to complicated pancreatic pseudocyst. The increase in the size of a known preexisting pseudocyst and the accompanying fever and rigor, made the medical team to first include in their differential diagnosis the infection of the pseudocyst. Blood cultures and pancreatic pseudocyst's aspirate culture revealed *Enterococcus Faecium*, that was sensitive to daptomycin. Daptomycin treatment was added to the initial intravenous regimen; piperacillin-tazobactam. Almost three weeks after initiation of daptomycin the nail changes that are displayed below were observed. The patient was receiving only the antibiotics through a peripheral vein. After the completion of six-week antimicrobial therapy, the nail lesions started to subside and a month later they disappeared.

The commonest drug-induced nail changes are nail plate deformity, nail dystrophy, paronychia and pigmentation of the nail plate. All the parts of the nail can be affected; the nail matrix, nail bed, peri-ungual tissue and blood vessels feeding the nails. Elderly are more vulnerable to nail changes caused by drugs. Numerous drug categories have been implicated; chemotherapeutic, sulfonamides, dapsone, itraconazole, lithium, metoprolol, etc. [1]



**Figure 1:** Hand nails' deformity, nails' dystrophy, yellow discoloration



**Figure 2:** Thumbnail's deformity and dystrophy

### References

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