

## Abstract

Ecthyma Gangrenosum is a skin lesion which is classically described in patients with *Pseudomonas aeruginosa* sepsis, it is associated with high mortality if not treated promptly. This skin lesion is usually seen among patients who are immunocompromised and critically ill, but it has occasionally been described in patients without a classic immunocompromised state and evidence of bacteremia. Patients present with typical skin lesions and features of sepsis. Diagnosis is based on the typical clinical appearance of the skin lesions and confirmation of the microbial etiology by the cultures of blood and skin lesion exudates. Treatment is done with appropriate antibiotic therapy and surgical debridement when necessary.

Here we report a case of a 69-year-old male patient who had a prolonged hospital stay due to a lower respiratory tract infection following coronary artery bypass graft surgery, while he was recovering from the lower respiratory tract infection, he again developed fever with typical skin lesions suggestive of ecthyma gangrenosum. There was no evidence of classical immunocompromised state. After diagnosis patient was treated successfully with appropriate intravenous antibiotics and achieved a full recovery.

This shows the importance of the prompt diagnosis of this rare clinical sign, ecthyma gangrenosum which will result in reducing the high mortality associated with *Pseudomonas aeruginosa* sepsis.

Key words – ecthyma gangrenosum, pseudomonas aeruginosa, septicemia