

Abstract

Melioidosis with prostatic abscess is a diagnostic and therapeutic challenge due to a lack of guidelines as it is a rare entity and mimics urinary tract infections (UTI). It can be easily missed or misdiagnosed. The choice of antibiotics with good prostatic penetrance and pseudomonas cover is important. In this case, a 60-year-old previously unevaluated gentleman presented with a fever, lower abdominal and back pain with dysuria for 2 weeks. He was hemodynamically unstable on admission and was treated at Intensive Care Unit(ICU). His blood culture became positive for pseudomonas species and Trans Rectal Ultrasound Scan (TRUS) guided aspiration and culture was positive for *Burkholderia Pseudomallei*. An isolated prostatic abscess caused by melioidosis is a rare entity.