

Abstract

Tropical Pyomyositis (TP) is a pyogenic infection of skeletal muscle. Diagnosis of TP is difficult due to nonspecific presentation. Though recurrent infection of TP is rare, we report two episodes of TP in a 56-year-old lady with type 2 diabetes. Initially, she presented with left thigh pain and swelling and diagnosis was confirmed with MRI of left thigh. She was treated with intravenous co-amoxiclav, cefotaxime and discharged with oral cefixime. After five months, she presented again with left thigh pain and swelling. Diagnosis was confirmed by repeat MRI of left thigh and ultrasound scan guided muscle biopsy. She was treated with intravenous flucloxacillin, clindamycin and discharged with oral flucloxacillin and clindamycin. She recovered fully without long term sequelae.
