

## **PULMONARY MYCOBACTERIOSIS DUE TO *MYCOBACTERIUM MUCOGENICUM***

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A 28-year-old patient, mother of the 15-month-old child, suffered from recurrent infections of respiratory system infections with the productive cough, morning hemoptysis and subfebrile states since beginning of the year 2005. The weight loss was 4 kg. After the failure of repeated treatment with a broad spectrum of antibiotics, she was referred to an ambulatory for tuberculosis and lung diseases in March 2005. By means of computer tomography, bilateral infiltration in the lower lobes of lungs even with a cavity on the right was found. *Mycobacterium mucogenicum* was isolated from one sample of sputum taken on April 15 2005. The four-drugs therapy – clarithromycin + rifabutin + ofloxacin + ethambutol was started. Eight days later, this therapy was changed because of undesirable adverse reaction. The combination of streptomycin + rifabutin + clofazimine + ethambutol, and two months later clofazimine + ethambutol, continued up to the total length 1 year from the beginning of the therapy. After the termination of the treatment, at the end of June 2006, computer tomography revealed only minimal changes – a thin-walled cavity of 17 x 15 mm in the right lung. The infiltration had totally resorbed. The isolation of *Mycobacterium mucogenicum* was considered of etiopathogenetically significant and the pulmonary disease due to *Mycobacterium mucogenicum* was reported to the Register of TB of the Czech Republic. The source of infection was not established.