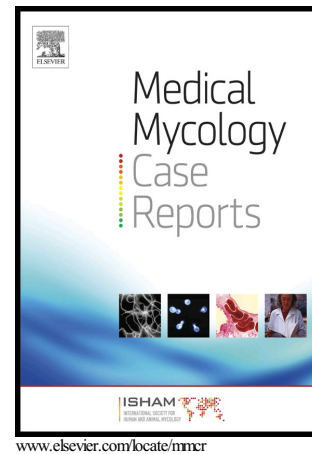


Author's Accepted Manuscript

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PII: S2211-7539(18)30061-7
DOI: <https://doi.org/10.1016/j.mmcr.2018.05.002>
Reference: MMCR288

To appear in: *Medical Mycology Case Reports*

Received date: 15 January 2018
Revised date: 26 April 2018
Accepted date: 2 May 2018

Cite this article as: Merad Yassine and Adjmi-Hamoudi Haiet, Self-injury in schizophrenia as predisposing factor for otomycosis, *Medical Mycology Case Reports*, <https://doi.org/10.1016/j.mmcr.2018.05.002>

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Self-injury in schizophrenia as predisposing factor for otomycosis

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Abstract

Ear self-mutilation have been reported in schizophrenia, Mechanical damages to the auditory canal, like cleaning ear with hard and unsterile objects are predisposing factors of otomycosis.

We present a case of repeated self-induced auricular trauma in schizophrenic patient. Aural swab were collected and examined by direct microscopy and culture, revealing *Aspergillus flavus*. A traumatized external ear canal skin can present favourable condition for fungal growth in the psychiatric population.

Keywords:

Aspergillus flavus; ear-injury; otomycosis; schizophrenia; self-injury

1. Introduction

Otomycosis is a fungal infection of external auditory canal. Factors predisposing to this infection canal range from existing diseases, such as seborrheic dermatitis, eczema, psoriasis, climatic conditions and trauma [1].

They are different types of deliberate self-mutilating behaviours like self-cutting, bite, burns or ulcerations. Sometimes, especially among psychotic inpatient eye, tongue, ear or genital self-mutilation have been reported [2], we believe to be the first to report otomycosis in schizophrenia; it seems that this benign condition is neglected in the psychiatric population.

2. Case

A 56 year-old man with a 15 year history of schizophrenia, receiving inpatient care in a psychiatric unit, under continuous oral treatment with haloperidol (20 drops 3 times a day) presents multiple induced lesions of the auricle and the auditory canal (figure. 1)

two weeks prior to examination the patient complain of itching and show skin lesions with erythema, scaling and red papules on the auricle, history of repeated ear self-injury was recorded, psychiatric staff noted that ear-self injuries were applied by fingers and wooden sticks from hospital garden, itching persists for more than two weeks ago. Moreover, there were no clinical signs of fungal infection on hands and nails.

The diagnosis of acute otitis externa was made in day 2, in the presence of itching on manipulation of the auricle and objective findings at otoscopy, such as the infection confined to the ear canal with greenish fuzzy growth and local area hyperhemic and bleeding.

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