A 45-year-old human immunodeficiency virus (HIV)-positive male from northeastern India presented with fever and cough as well as a 3-month-old ulcer over the chin. On examination, there was a 5 × 5-cm superficial ulcer with a thick adherent crust over the chin (Figure 1). The individual had three papules with central umbilication over the neck and face. He had anemia (hemoglobin = 7.5 g) and a cluster of differentiation 4 (CD4) count of 89 cells/µL. His chest radiograph and computed tomography (CT) scan of the thorax showed right mid- and lower-zone consolidation. Histopathology of the umbilicated papule and the ulcer showed numerous yeast forms and a few sausage-shaped structures with central septation within the histiocytes (Figure 2). Fungal tissue cultures from skin lesions and bronchoalveolar lavage aspirates showed a greenish yellow, flat, velvety wrinkled colony with surrounding diffusible red pigment (Figure 3). This was diagnostic of *Penicillium marneffei* infection. Sputum smears and culture were negative for tuberculosis. Direct immunofluorescence detection for *Pneumocystis carinii* from sputum sample was negative.

Mucocutaneous lesions are seen in two-thirds of patients with *Penicillium marneffei* infection. These include generalized papular eruptions, central umbilicated papules resembling molluscum contagiosum, acne-like lesions, folliculitis, subcutaneous nodules, necrotic nodules, papules and nodules with ulceration, oropharyngeal papules, palatal perforation, and genital papules.¹

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REFERENCE


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**Ulcer over Chin in an Immunocompromised Individual**

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**Figure 2.** Yeast and sausage shaped structure with central septation, PASD 400×. This figure appears in color at www.ajtmh.org.

**Figure 3.** Greenish yellow, flat, velvety colony with surrounding diffusible red pigmentation. This figure appears in color at www.ajtmh.org.