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Clinical Image

Title: Lymphangitis due to Insect Sting after Radical Mastectomy

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A 73-year-old woman presented with lymphoedema of the right upper limb. She had a history of breast cancer treated with radical mastectomy which was supplemented with radiotherapy. Physical examination showed erythematous plaques which had a purpuric centre, with lymphangitis on the right anterior chest wall, right arm and on the dorsum of the hand. The patient history revealed that she had been bitten by an insect. Lymphoedema can be distinguished as primary or secondary with the latter form well known as a complication after lymphadenectomy or radiation treatments [1,2]. A less common cause of lymphoedema is malignant infiltration of cutaneous lymphatics [3]. Insect stings or bites cause secondary lymphangitis, the latter being of toxic, allergic and/or infectious nature. Differential diagnosis includes leishmaniasis, rickettsioses, borreliosis, jellyfish sting and phytophotodermatitis [4,5]. The patient was given a treatment consisting of oral levofloxacin 500 mg daily for 1 week which led to complete healing of the lesions.

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