

Table SII. Evaluation of the association between localization of disease and types of bacteria. Since no significant correlation was reported between upper or lower body and number or type of bacterial families and in order to facilitate statistical evaluation, the analysis was performed for species and patients with lesions in the upper or lower body and patients with lesions localized at both the upper and lower body (termed as "extensive disease")

Species isolated from patients, <i>n</i>	
Localization of disease	Median (IQR)
Upper body (only) (<i>n</i> = 12) ^a	1 (0.5–2)
Lower body (only) (<i>n</i> = 22) ^a	1 (1–3)
Upper and lower body (<i>n</i> = 13 ^a)	4 (3–5)
Upper OR lower body (<i>n</i> = 34) ^b	1 (1–3)
Upper AND lower body (<i>n</i> = 13) ^b	4 (3–5)
Association with the localization of the disease ^c	
Coagulase-positive staphylococci	<i>p</i> = 0.029^d
Coagulase-negative staphylococci	<i>p</i> = 0.59
Streptococci	<i>p</i> = 0.020^d
Facultative-anaerobic enterococci	<i>p</i> = 0.79
Enterobacteriaceae	<i>p</i> = 0.35
Anaerobic enterococci	<i>p</i> = 0.97
Anaerobic non-enterobacteriaceae	<i>p</i> = 0.59
Other Gram-negative bacteria	<i>p</i> = 0.59
Other Gram-positive bacteria	<i>p</i> = 0.070

^aKruskal-Wallis (equality-of-populations) rank test; *p*-value = 0.068. ^bTwo-sample Wilcoxon rank-sum (Mann-Whitney) test; ***p*-value = 0.028**. ^cPearson's chi-squared test. ^dIn those 2 cases, isolation of the particular species was statistically significantly associated with "extended" disease ("Upper AND lower body" localization). Significant values are shown in bold.