

ACKNOWLEDGEMENT

We appreciate the valuable collaboration of K. Thestrup-Pedersen, MD, PhD, in reviewing the manuscript.

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Accepted February 13, 2001

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Molluscum Contagiosum on a Tattoo

Sir,

Molluscum contagiosum following tattooing practice is a very rare event. Here we report the second case, to our knowledge.

CASE REPORT

A 20-year-old Caucasian woman was admitted to our Institute because of the appearance of several papular lesions localized exclusively on the left forearm. The lesions had appeared in the context of a tattoo which had been created 3 weeks earlier. The patient stated that she was in good general health and that she was not on any therapy.

Dermatological examination revealed the presence of 10 papules which were localized exclusively within the tattoo: they were round, 2–4 mm in diameter, of different colours (from pearly to bluish), shiny and of a parenchymatous–hard consistency (Fig. 1). All papules were asymptomatic. No similar lesions were found on other areas of the skin surface or mucous membranes.

A general physical examination did not reveal anything pathological. All laboratory examinations, including tests for human immunodeficiency virus (HIV) infection, were within the normal range or negative. Histopathological examination, obtained from a shaving of a lesion, confirmed the clinical diagnosis of molluscum contagiosum (Fig. 2).

The patient refused all treatments that we suggested.

DISCUSSION

The practice of tattooing can transmit, albeit rarely, some severe systemic infectious diseases, such as hepatitis B and C (1–14), acquired immunodeficiency syndrome (AIDS) (15), tetanus (1, 10) and septicaemia (1). Several infectious diseases of the skin can also be transmitted, in particular warts (1, 6, 14, 16–18), but also rubella (10), vaccinia (1), impetigo (1, 10), erysipelas (1, 10), ecthyma (1, 10), cellulitis (1, 10), gangrene (1), chancroid (1, 10), syphilis (1, 6, 10, 14), cutaneous tuberculosis (1, 6, 10, 14, 18) and leprosy (1, 10, 14, 19–21). To our knowledge, only one previous case of



Fig. 1. Papules limited to within the area of the tattoo.

molluscum contagiosum following tattooing has been reported (22).

It is very likely that the appearance of molluscum contagiosum is related to tattooing, since all lesions appeared following tattooing and exclusively within the area covered by the tattoo. At least two pathogenetic hypotheses may be advanced: (i) viruses may have been transmitted by the instruments used for tattooing; this is the most likely hypothesis; or (ii) the ink may have been contaminated by viruses. Furthermore, some authors (17) have suggested that black dye can decrease locally either cell-mediated or humoral immunity. It seems highly unlikely that the patient had

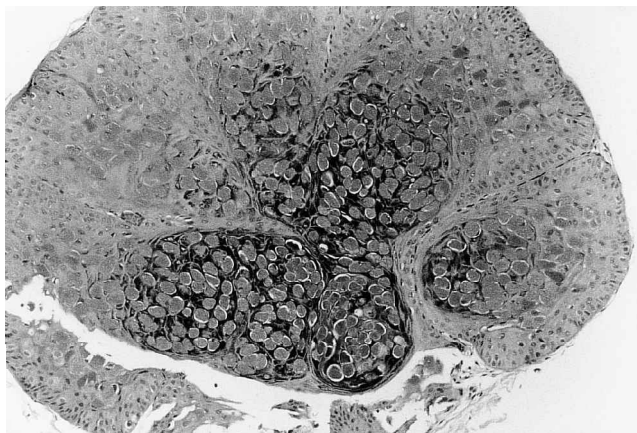


Fig. 2. Nodular lesion with clusters of keratinocytes characterized by nuclear amorphous eosinophilic material. (Haematoxylin & eosin, $\times 200$.)

clinically non-visible molluscum contagiosum in the area that was subsequently subjected to tattooing.

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Accepted January 31, 2001.

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