**PRESENTATION TIME: 4:30 PM – 4:40 PM**

**PRESENTER: Ye Amy Yao**

**CLINICAL MANAGEMENT GUIDELINES FOR MYCOBACTERIUM MARINUM INFECTION OF THE HAND AND WRIST**

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**BACKGROUND**: Infection with *Mycobacterium marinum* often affects the structures of the hand and wrist following exposure to aquaria. However, treatment of infection involving the deep tissue structures is controversial in the literature.

**METHODS**: Records of 16 patients aged 52 to 91 (mean 68.3) seen by a single hand surgeon with suspected or confirmed infection with *M. marinum* were reviewed. Infection was associated with an outbreak in New York City’s Chinatown.

**RESULTS**: The mean delay in presentation was 3.81 months (range: 1-9 months). 87.5% of patients had a positive history of fishbone exposure. Cultures were positive for *M. marinum* in only 43.5% of cases. All patients underwent combined surgical and medical treatment with nontuberculous mycobacterial antibiotics due to high clinical suspicion for *M. marinum*. 100% of patients experienced complete symptom resolution.

**CONCLUSIONS**: Clinical suspicion for *M. marinum* infection should be raised for insidious onset tenosynovitis worsened by corticosteroid therapy, negative routine bacterial cultures, and positive history of exposure to fish. Clinicians should be alert that steroid injections in the setting of a possible infectious process can greatly worsen the disease course. Management of *M. marinum* infection involving the deep structures of the hand should be managed surgically with a prolonged course of antibiotics to restore hand function.

**CONTENT CATEGORY**: Epidemiology

**KEYWORDS**: *mycobacterium marinum, management, Chinatown*