However, Mycobacterium fortuitum, a predominant organism, in catheter-associated infections, has rarely been documented in totally implantable venous access port (TVIAP)-associated bloodstream infections" Ye et al (2018).

Abstract:

RATIONALE: Rapidly growing mycobacteria (RGM) are well-known causative agents of human infections, particularly in immunocompromised hosts. However, Mycobacterium fortuitum, a predominant organism, in catheter-associated infections, has rarely been documented in totally implantable venous access port (TVIAP)-associated bloodstream infections.

PATIENT CONCERNS: A 25-year-old woman with breast cancer presented to hospital with repeated fever for several days. The patient first refused to remove the TVIAP in her body, and had a relapse of M. fortuitum bacteraemia four months later.

DIAGNOSES: Bacteria isolated from patient's blood and TVIAP were identified as M. fortuitum by Matrix-assisted laser desorption/ionization-time of flight spectrometry and bacterial 16s rDNA sequencing. The patient was diagnosed as a TVIAP-associated bloodstream infection.

INTERVENTIONS: The TVIAP was eventually surgically removed, and M. fortuitum was found to have localized on the tip of the catheter. The patient was treated by anti-infection therapy.
OUTCOMES:
The patient was treated with 4 weeks of intravenous amikacin and levofloxacin followed by 4 weeks of oral levofloxacin. No episodes of fever occurred during the follow-up to date.

LESSONS: RGM infections remain a challenging issue for TIVAPs. Accurate species identification, timely intravascular catheter removal and appropriate antibiotic therapy are recommended to ensure successful outcomes.

Reference:

Ye, H., Zeng, J., Qin, W., Yang, Z., Yang, L., Wu, Z. and Du, G. (2018) A totally implantable venous access port associated with bloodstream infection caused by Mycobacterium fortuitum: A case report. Medicine (Baltimore). 97(29), p.11493.

doi: 10.1097/MD.0000000000011493.