Recurrent superficial cellulitis-like erythema associated with *Helicobacter cinaedi* bacteremia, according to a case report published online Jan. 30 in *The Journal of Dermatology*.

Yuko Adachi, from the Gifu University Graduate School of Medicine in Japan, and colleagues described the case of an immunocompromised man with recurrent superficial cellulitis-like erythema associated with *H. cinaedi* bacteremia.

The researchers note that the patient was an 85-year-old male with polymyalgia rheumatica that was treated with prednisone. He complained of painful erythema on his lower legs and on his abdomen and thighs with sudden onset of fever. *H. cinaedi* was isolated from blood culture and identified in polymerase chain reaction. The symptoms were alleviated in two days with meropenem (1.5 grams per day), and treatment was discontinued after 10 days. Ten weeks after discontinuation of treatment, the patient returned with sudden high fever and painful erythema. *H. cinaedi* was identified from blood culture. Symptoms were alleviated in two days with meropenem, which was continued for 24 days followed by minocycline for five weeks. No symptom recurrence was seen in one year.

"There are no recommended guidelines for treatment of *H. cinaedi* infection," the authors write. "Symptoms caused by *H. cinaedi* resolved after two days of carbapenem therapy. However, as 30 to 60 percent of patients with *H. cinaedi* infection have recurrent symptoms, long-term use of antibiotics is recommended."