

Peristomal struvite incrustations

Cristina Isabel Pinho Resende, Teresa Pereira, Jorge Ribeiro, Celeste Brito

Department of Dermatology and Venereology, Hospital de Braga, Braga, Portugal

Correspondence to
Dr Cristina Isabel Pinho Resende,
cristinapresende@gmail.com

Accepted 2 November 2014

DESCRIPTION

A 42-year-old woman who had a urostomy formed at the age of 6 years for a neurogenic bladder due to a myelomeningocele presented to our department with painful white deposits of hard consistency on peristomal skin, suggestive of struvite incrustations after some weeks of evolution (figure 1).



Figure 1 White deposits of hard consistency on peristomal skin.



Figure 2 Resolution of incrustations after treatment with daily oral vitamin C and daily application of 2% salicylic acid gel/15% glycolic acid.

The deposition of magnesium ammonium phosphate and carbonated apatite crystals (struvite) on peristomal skin occurs almost exclusively in urostomies, and is caused by contact with alkaline urine infected by urease-producing bacteria.^{1 2}

Our patient was treated with oral vitamin C and daily application of 2% salicylic acid gel/15% glycolic acid. She was observed 4 weeks later with good response (figure 2).

The treatment of struvite incrustations on peristomal skin consists of oral rehydration with non-alkaline beverages, and acidification of urine with oral ascorbic acid and application of acidifying agents on peristomal skin.^{1 2}

Learning points

- ▶ Peristomal struvite incrustations occur almost exclusively in urostomies.
- ▶ Struvite incrustations are caused by contact with alkaline urine infected by urease-producing bacteria.
- ▶ The treatment of struvite incrustations consists of oral rehydration with non-alkaline beverages, and acidification of urine with oral ascorbic acid and application of acidifying agents on peristomal skin.

Competing interests None.

Patient consent Obtained.

Provenance and peer review Not commissioned; externally peer reviewed.

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To cite: Resende CIP, Pereira T, Ribeiro J, et al. *BMJ Case Rep* Published online: [please include Day Month Year] doi:10.1136/bcr-2014-207472

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