

TREATMENT

Urinary Tract Infections

(Table 164-2) Most *P. aeruginosa* UTIs are considered complicated infections that must be treated longer than uncomplicated cystitis. In general, a 7- to 10-day course of treatment suffices, with 10–14 days of therapy in cases of pyelonephritis. Urinary catheters, stents, or stones should be removed to prevent relapse, which is common and may not be due to antibiotic resistance but rather to factors such as a foreign body that has been left in place or an ongoing obstruction. Removal of a urinary catheter will allow shorter courses of antibiotic therapy if that is the only predisposing factor.

Skin and Soft Tissue Infections Besides pyoderma (ecthyma) gangrenosum in neutropenic patients, folliculitis and other papular or vesicular lesions due to *P. aeruginosa* have been extensively described and are collectively referred to as *dermatitis*. Multiple outbreaks have been linked to whirlpools, spas, and swimming pools. To prevent such outbreaks, the growth of *P. aeruginosa* in the home and in recreational environments must be controlled by proper chlorination of water. Most cases of hot-tub folliculitis are self-limited, requiring only the avoidance of exposure to the contaminated source of water.

Toe-web infections occur especially often in the tropics, and the “green-nail syndrome” is caused by *P. aeruginosa* paronychia, which results from frequent submersion of the hands in water. In the latter entity, the green discoloration results from diffusion of pyocyanin into the nail bed. *P. aeruginosa* remains a prominent cause of burn wound infections in some parts of the world. The management of these infections is best left to specialists in burn wound care.

Infections in Febrile Neutropenic Patients In febrile neutropenia, *P. aeruginosa* has historically been the organism against which empirical coverage is always essential. Although in Western countries these infections are now less common, their importance has not diminished because of persistently high mortality rates. In other parts of the world, *P. aeruginosa* continues to be a significant