



## A rare complication of Mycobacterial Infection after Botox

The incidence of non-tuberculous mycobacteria (NTM) has increased in recent years. Of significance is NTM related soft tissue and skin infections which have coincided with a surge of cosmetic related procedures. NTM also known as atypical mycobacteria, are ubiquitous in the environment. Delay in the diagnosis of NTM is not uncommon. Standard microscopy and culture usually has a low yield, and NTM does not respond to conventional antibiotics. We report a case of a 34-year-old female patient who first presented to the Emergency department with left jaw swelling and tenderness after Botulinum toxin was injected into her masseters for teeth grinding four months prior. A small lump initially developed and gradually increased 2–3 weeks after the initial injection. Despite a course of oral phenoxymethylpenicillin and clindamycin, there was no improvement to the tender and painful lesion. On physical examination, there was a tender fluctuant nodule at the site of the Botox injection on the left angle of jaw. A skin biopsy performed showed changes suggesting an infection with mixed granulomatous inflammation extending to the deep dermis, comprising foamy histiocytes, lymphocytes, plasma cells, neutrophils and occasional granulomas. Ziehl-Neelsen staining was negative for acid fast bacilli. The lesion was aspirated and cultured; *Mycobacterium immunogenum* was isolated. This case highlights the potential hygiene-related aetiology of NTM and reflects the need for stronger infection control practices in cosmetic practices.