

Can nocardiosis be isolated from ear discharge of otitis media patients? Yes or no

Dear Sir,

Cholesteatomas is disease of the middle ear.^[1] Its microbial etiology is unknown. However, it has to be said that different bacteria such as *Pseudomonas aeruginosa*, *Staphylococcus aureus*, *Klebsiella* sp., *Proteus* sp., *Alkaligenes* spp., *Streptococcus pneumoniae*, *Escherichia coli*, and *Citrobacter freundii* and fungi *Aspergillus niger*, *Candida albicans*, *Candida tropicalis*, *Aspergillus flavus*, and *Candida parasilopsis* predominant bacteria was isolated causing otitis media anyway.^[2] Nevertheless, no reports have shown

that to isolation of *Nocardia* sp. related to otitis media especially in Cholesteatomas as an important diseases. *Nocardia* is a genus of weakly staining Gram-positive, catalase-positive, rod-shaped bacteria. It forms partially acid-fast beaded branching filaments (acting as fungi, but being truly bacteria). It contains a total of 85 species. Some species are nonpathogenic, while others are responsible for nocardiosis.^[3] But little is known about relation between *Nocardia* sp. and otitis media or cholesteatomas. *Nocardiosis* is mainly referred to as the lung disease in immunocompromised

patients, so no report has confirmed infection with ear with *Nocardia* sp. *Nocardiosis* of the middle ear has not been reported so far. The disease mainly with Cholesteatomas ignored in order to find out aetiology perhaps no microbial investigation were performed in order to find out the problem.^[4] I would like to bring your attention in this letter to editor there are different factors in Cholesteatomas etiology, *Nocardiosis* may be doubtful as another microbial infection along with other micro-organism which mentioned above. Before and after Cholesteatomas surgery by surgeon in the patients ear discharge or fluid must be cultured by expert microbiologist in selective medium in order to find out the organisms. Perhaps *Nocardia* spp or other known or unknown organism may be added to known organisms anyway. Further studies will be shown the facts.

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Conflicts of interest

There are no conflicts of interest.

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References

1. Konishi M, Iwai H, Tomoda K. Reexamination of Etiology and Surgical Outcome in Patient With Advanced External Auditory Canal Cholesteatoma. *Otol Neurotol* 2016;37:728-34. doi: 10.1097/MAC.0000000000001079.
2. Ryan KJ, Ray CG. *Sherris Medical Microbiology*. 4th ed. McGraw Hill. 2004; 460-2. ISBN 0-8385-8529-9.
3. Osazuwa F, Osazuwa E, Osime C, Igharo EA, Imade PE, Lofor P, Momoh M, Omoregie R, Dirisu J. Etiologic agents of otitis media in Benin city, Nigeria. *N Am J Med Sci* 2011;3:95-8. doi: 10.4297/najms.2011.395.
4. Haarstad AC, Eisenschenk MC, Heinrich NA, Weese JS, McKeever PJ. Isolation of bacterial skin flora of healthy sheep, with comparison between frequent and minimal human handling. *Vet Dermatol* 2014;25:215-21. e55-6. doi: 10.1111/vde.12126.

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