We report a case which presented marked swelling of external nose with the diagnosis of a furuncle of the nose and treated intensively with systemic administration of antibiotic agents.

A 68-year-old male visited our emergency room complaining of pyrexia, headache, and swelling of the nose that had persisted for 5 days. He had been treated for diabetes mellitus for 17 years and the sequential nephropathy. Although the patient had a clear sensorium and stable vital signs, laboratory investigations revealed a significantly elevated white blood cell count (22.6 × 10³ per microliter) and serum C-reactive protein level (22.1 mg per deciliter). The patient’s external nose was extremely swollen and small abscesses were present in some pores; these abscesses were burst partially and crust formation was observed (Fig. 1). The patient was diagnosed with having a furuncle of the nose. Bacterial cultivation detected *Staphylococcus aureus* from the abscess. The nasal swelling improved after treatment with intravenous vancomycin hydrochloride for 1 week followed by oral cephalosporin for 3 weeks, combined with the topical purulent drainage and the use of gentamicin sulfate ointment (Fig. 2). This case demonstrates that local folliculitis sometimes requires intensive treatment.