

EXTENSIVE NECROTIZING FASCIITIS - CASE REPORT

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Introduction: Necrotising fasciitis (NF) is a rare and aggressive soft tissue infection, primarily involving the superficial fascia and subcutaneous tissue and resulting in extensive undermining of the surrounding tissues. Mortality is still high in NF despite use of powerful antimicrobial drug regimens and advances in the care of the critically ill patients. Due to the high mortality, immediate and aggressive surgical debridement, antibiotics and intensive care is necessary.

Discussion: A 49 years old lady presented with decreased level of consciousness, fever, and swelling of right leg. Patient has a history of stepping on a piece of metal but neglected treatment. Patient was diagnosed with NF extending through the right lower limb up to right lateral chest wall, severe sepsis with multiorgan failure. Patient was started on antibiotic and prepared for high above knee amputation. NF can occur after major traumatic injuries, even after minor breaches of the skin or mucosa, or non-penetrating soft-tissue injuries. Subtle differences in clinical presentation may occur but the clinical approaches to diagnosis and treatment are very much the same. The diagnosis of idiopathic or primary NF may be challenging because it occurs without a known causative factor or portal of entry for bacteria. For patients with aggressive soft-tissue infection or systemic toxicity, prompt surgical exploration is extremely important. Imaging evidence of gas in the tissues, or the presence of crepitus, should prompt immediate surgical consultation. The patient in this case is already in critical state with LRINEC score of 9, thus opted for high right above knee amputation.

Conclusion: We conclude that NF share many clinical and pathological features, and all such infections result in extensive tissue destruction. Early diagnosis, prompt surgical intervention, and appropriate antibiotic treatment are essential to reduce mortality and improve outcomes.