ABSTRACT

BACKGROUND AND OBJECTIVES:

Fournier’s gangrene was first described by Fournier in 1764 as necrotizing fascitis involving the perineal region. It also involves areas like lower urinary tract, anus, rectum, and colon. It is a fulminating, rapidly spreading infection which cause thrombosis of blood vessels which results in gangrene of skin.

It affects all age groups and has been reported in both males and females and various etiological factors have been described. It is more commonly seen in middle age groups with immunocompromise status like diabetes mellitus, malignancy, alcoholism, chronic renal disease.

The objective of this study mainly includes study of age distribution and risk factors of Fournier’s gangrene, as its relevant to check which age group is more prone to develop this condition. Another objective is to find the most common organisms associated with Fournier’s gangrene, as it helps in the mode of treatment. This also include a study about the outcome in management of Fournier’s gangrene.
METHODS:

35 cases of Fournier’s gangrene were analyzed. Patient’s history and clinical examination was done to arrive at a diagnosis. Age, etiology, predisposing factors, extent of involvement, Pus culture and sensitivity, lab investigations and surgical outcome were evaluated.

RESULTS:

The mean age in this study is 55.3yrs. It’s found that major predisposing factors are diabetics mellitus and alcoholism, about 15% of the patients where having chronic kidney disease. Only in 17% of cases where there for which no causes could be found out. Pseudomonas where the causative organism for about 40% of the case and e coil was identified in almost 23% of cases, the first culture was found to be sterile In 26% of cases. All patients are treated with appropriate antibiotics and early debridement, among which 3 of them achieved spontaneous healing. 15 patients that is around 51% needed delayed suturing and 14 patients needed skin grafting. Adequate resuscitation, transfusion of blood and blood products, early administration of broad spectrum antibiotics with early extensive thorough wound debridement improves the outcome.
INTERPRETATION AND CONCLUSION:

Fournier’s gangrene is a rare emergency disorder that needs early diagnosis and treatment. So even minor infection to perineal region should be given due attentions negligence may lead to life threatening complication

So in Fournier’s gangrene early resuscitation of vitals with transfusion of blood and blood products if needed, the adequate antibiotic care and early extensive thorough wound debridment will certainly improve the outcome.