

### FOURNIER'S GANGRENE

Fournier's gangrene is a polymicrobial synergistic necrotizing infection of the perirectal, perineal or genital area. Anorectal disorders, genitourinary infections and traumatic injuries are the most common causes.

The patient usually presents with erythema, pain and swelling. There is often crepitus of the skin, and areas of gangrene or blister formation (Fig. 1). The skin manifestations may not represent the true extent of the infection, which moves aggressively along fascial



FIG. 1

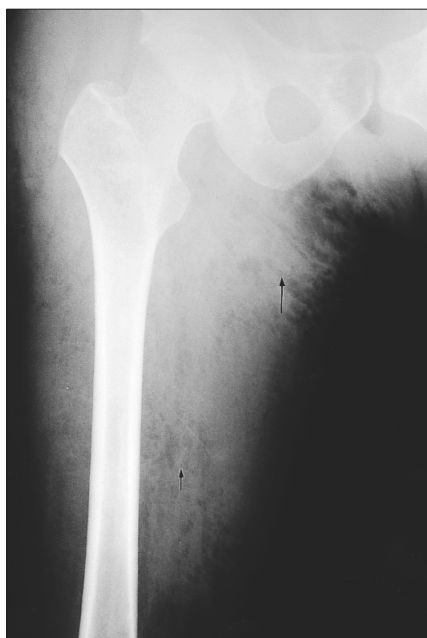


FIG. 2



FIG. 3

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**FIG. 4**

planes. Also, the patient usually has systemic signs such as fever, hypotension, tachycardia and leukocytosis.

Plain radiographs demonstrate subcutaneous emphysema in 90% of cases (Fig. 2).

Initial treatment requires volume resuscitation and initiation of broad-

spectrum antibiotics. Aggressive surgical débridement of all nonviable tissues is then necessary. Fig. 3 is an operative view in the case of a patient who was fortunate to have his scrotum and musculature spared by immediate surgery.

In the majority of cases, the testes,

glans penis, bladder and rectum are spared because they have a separate blood supply. Urinary and fecal diversion may be required. Large tissue defects can be covered with skin grafts or by flap placement, with good results (Fig. 4).

Despite aggressive treatment, this severe infection is associated with a death rate of 40%.

**Bibliography**

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