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Cervical necrotizing fasciitis; Diagnosis and management

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Background & Aim: Necrotizing fasciitis of the neck is an uncommon, aggressive soft tissue bacterial disease causing necrosis of the superficial fascia and subcutaneous tissue. The disease is associated with high mortality and morbidity rates. Due to its rarity and misleadingly presentation, it is not often initially suspected. The aim of our study is to review the management of cervical necrotizing fasciitis in our institution.

Method: A retrospective study of patients ultimately diagnosed with cervical necrotizing fasciitis during the period between January 2000 and December 2013. Data collected from patients records included demography, comorbidity, initial presentation, radiological and bacteriological findings, surgical intervention, complications, and patient survival.

Results: Six patients with cervical necrotizing fasciitis were identified and studied, all were males. Diabetes mellitus was the dominant associated comorbidity in five patients. All patients initially presented with a painful red neck swelling. At the initial physical examination, the tender erythematous cervical swelling was noted in all patients. Skin necrosis was present in one patient. The submandibular triangle was involved in all patients. The source of infection was odontogenic in four patients, pharyngeal in one case, and idiopathic in another. Microbiological examination identified a mixed flora in five patients. Five patients underwent CT scan of the head and neck with a positive finding of gas in all patients. Aggressive surgical debridement in combination with intravenous antibiotic therapy was used in the management of all patients. Three patients required two or more additional procedure for serial debridement of the neck. Four patients developed superior mediastinitis, two had septicemia, and one patient had a perforated duodenal ulcer and multi-organ failure. There was one case of death with the overall mortality of 16.6%.

Conclusion: The clinical presentation of cervical necrotizing fasciitis often appears benign. Maintaining a high index of suspicion especially in diabetic patients is crucially important. Early diagnosis and timely surgical management is the key to the successful outcome of cervical necrotizing fasciitis.

Biography

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