

Outcomes in Fournier's Gangrene using skin and soft tissue sparing flap preservation surgery for wound closure: An alternative approach to wide radical debridement

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Abstract

Fournier's Gangrene remains a forbidding necrotizing soft tissue infection (NSTI) that necessitates early recognition, prompt surgical excision and goal directed antibiotic therapy. Traditionally surgical management has included wide radical excision for sepsis control. This management often leaves large morbid wounds that require complex wound coverage, prolong hospitalizations and/or delayed healing. We report seventeen consecutive patients over a ten-year period, who were treated with concurrent skin and soft tissue sparing surgery, negative pressure wound therapy (NPWT) and serial delayed primary closure (DPC). The mean number of total surgeries including simultaneous debridement and reconstruction was 5.4. The average ICU and hospital length of stay (LOS) was 3.1 and 18.9 days, respectively. The average number of days from initial consult to wound closure was 24.2 days. The need for colostomy and skin grafts were nearly eliminated with this surrogate approach. Delayed primary closure (DPC) was achieved in 100% of the patients using this reproducible technique. Only 1.2% required split thickness skin grafting as part of wound closure. There were no mortalities in this series of patients. Greater than half were partially managed as an outpatient during wound closure. Their mean number of outpatient management days was 16 during staged DPC. To our knowledge, this is the largest case series reported in the literature using skin and soft tissue sparing surgery for wound closure of the NSTI Fournier's Gangrene.

Biography

Travis L Perry is a burn surgeon for Shriners Children's Ohio. He earned his undergraduate degree from Salem State University and medical degree from East Carolina University School of Medicine. He completed residencies at Wake Forest University Baptist Medical Center and Louisiana State University Health Science Center. Perry completed fellowships at the University of Oslo Norway Biotechnology Center and the University of Texas Medical Branch. He is licensed in Ohio and North Carolina.

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