

VIEWER'S CHOICE

Necrotising Fasciitis in A Neonate

Neelu Desai, Sujata Sharma

Case: A full term 16 days old female infant weighing 2 kgs was admitted for fever, lethargy and refusal to feed. Physical examination revealed erythematous, tender area over the back with gangrenous changes and generalized skin exfoliation. Immediate extensive surgical debridement of the necrotic tissue and fascia was done. Intravenous antibiotics, fluid resuscitation and analgesia were commenced. The wound culture grew *staphylococcus aureus*. Skin biopsy showed septal panniculitis with damaged connective tissue and dystrophic fibres corroborating with the diagnosis of necrotizing fasciitis. The patient succumbed to septicemia on day 13 of hospital stay.

Dept of Pediatrics, TN Medical College, BYL Nair Hospital, Mumbai 400008

Address for correspondence: Dr Neelu Desai, Vish-nuprasad, 2nd floor, 69, Ranade road, Dadar [w], Mumbai 400028.

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Discussion: Necrotizing fasciitis is rare in newborn [66 cases reported] with a fulminant course and high mortality [59%]. It is a bacterial infection of skin, sub-cutaneous tissue and fascia characterized by rapid spread, marked tissue edema and systemic toxicity. Wound cultures are polymicrobial. Hyperbaric oxygen and skin grafting have been tried but could not be done in our patient with our limited resources.

Figure 1: Necrotizing fasciitis with exposure of underlying bone

