



# Fulminating necrotising fasciitis

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## Clinical Image

A 62-year-old gentleman presented to emergency with complaints of breathlessness for one day. There was no history of pain in abdomen or chest, vomiting, altered bowel habits, headache, cold, cough, blood in sputum. There was no history of: Trauma, co morbidity, surgery in the past, history of previous hospitalisation.

On presentation, Patient was conscious, co-operative, well oriented to time place and person, Afebrile, Heart Rate: 90 beats per minute, Blood Pressure: 140/90 mm Hg, Oxygen saturation on Room air was 88 percent, Body Mass Index: 32 kg/m<sup>2</sup>.

The patient was being resuscitated in the emergency room, in RED zone.

On head to toe examination, there were multiple blisters over the lower limb, extending from the thigh till ankle joint. A diagnosis of Necrotising Fasciitis was made, and the clinical presentation of the patient was secondary to septicaemia.

No such lesions were present anywhere in the body. Per Abdomen examination was normal.

Emergency surgery was planned, and Surgical Debridement was performed.

On a concluding note, no matter how many advanced imaging modalities human mind may develop, but all them will be a birth from the most intelligent machine: Human Brain. So, the meticulous history and the skill of clinical examination, still, is the foremost requirement of medical field.





**Figure 1:** Blisters present over the thigh



**Figure 2:** The deep wound over the leg and blisters over thigh