

16th International Conference on

Clinical and Experimental Ophthalmology

September 18-20, 2017 | Zurich, Switzerland

Bilateral periorbital necrotizing fasciitis: Case report

Fabio H L Leonardo, Allan C P Goncalves and Mariana Anabuki¹Faculty of Medicine of ABC (FMABC), Brazil²University of Sao Paulo, Brazil³BWS Institute of Sao Paulo, Brazil

Introduction: Necrotizing fasciitis (NF) is a severe infection of subcutaneous tissue characterized by necrosis of the superficial fascia and overlying skin. Previous trauma and comorbidities are usually associated with NF. Type I NF is polymicrobial (both aerobic and anaerobic organisms), whereas Type II is caused by streptococcus or staphylococcus. Periorbital NF (PNF) is rare and presents lower mortality rates (10 to 14%) compared to NF of other parts of the body (20 to 35%). Visual loss and soft tissue defects are the most common morbidities. Early diagnosis, prompt medical treatment and timely surgical intervention lead to better prognosis.

Case Report: A 50-year-old female patient presented with swelling and redness of the right upper eyelid that progressed over 24 hours to both eyelids bilaterally. The patient had facial redness with bilateral eyelid oedema and well-demarcated blue-black necrotic plaques. She was otherwise healthy. CT scan showed important subcutaneous bilateral eyelid swelling and a right anterior ethmoidal sinusitis associated. Empirical intravenous antimicrobial therapy was initiated. The patient underwent surgical debridement of necrotic tissue at the same day. Daily dressing change of the exposed wound was performed. The surgical incisions healed well with no signs of infection. Microbial culture of the necrotic tissue revealed the presence of *Streptococcus pyogenes*. The patient underwent a second surgical procedure: forehead flap was performed on the upper eyelids, and advancement flap was performed on the lower eyelids. At fourth month postoperative follow-up, the patient had a third procedure for flaps revision and cosmetic touch ups, which improved eyelid closure and appearance.

Conclusion: PNF is a rapidly progressive disease that demands early diagnosis and treatment. We reported an uncommon case of PNF with no trigger event or comorbidities. Despite the severity of the disease, timely antibiotic therapy and surgical interventions were crucial for the successful outcome.

Biography

Fabio Leonardo is a second-year resident in Ophthalmology at FMABC (Brazil). He graduated in Medicine from University of Sao Paulo in Ribeirao Preto, after dropping out Physics Engineering at Federal University of São Carlos (Brazil). During medical school, he was an exchange student for one year at University of California San Diego (USA), and he had an observational and research internship at Massachusetts General Hospital of Harvard Medical School (USA). He has always been involved with academic research and medical conferences; he has already attended international congresses and presented scientific research on them. He is a technology-impassioned Researcher who aims to use creativity to improve Ophthalmology development.

oftalmofabio@gmail.com

Notes: