

# Fournier's Gangreen

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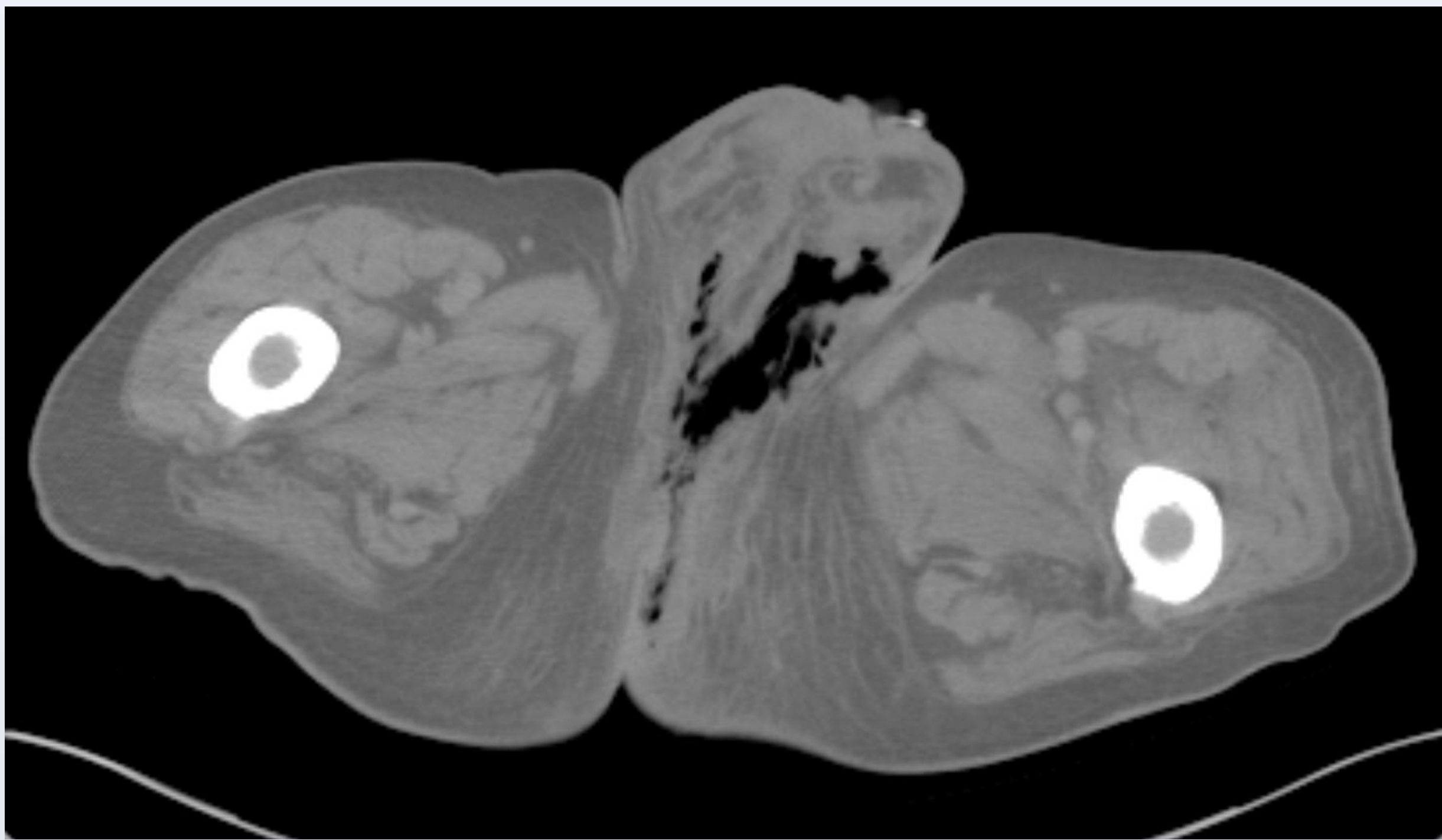
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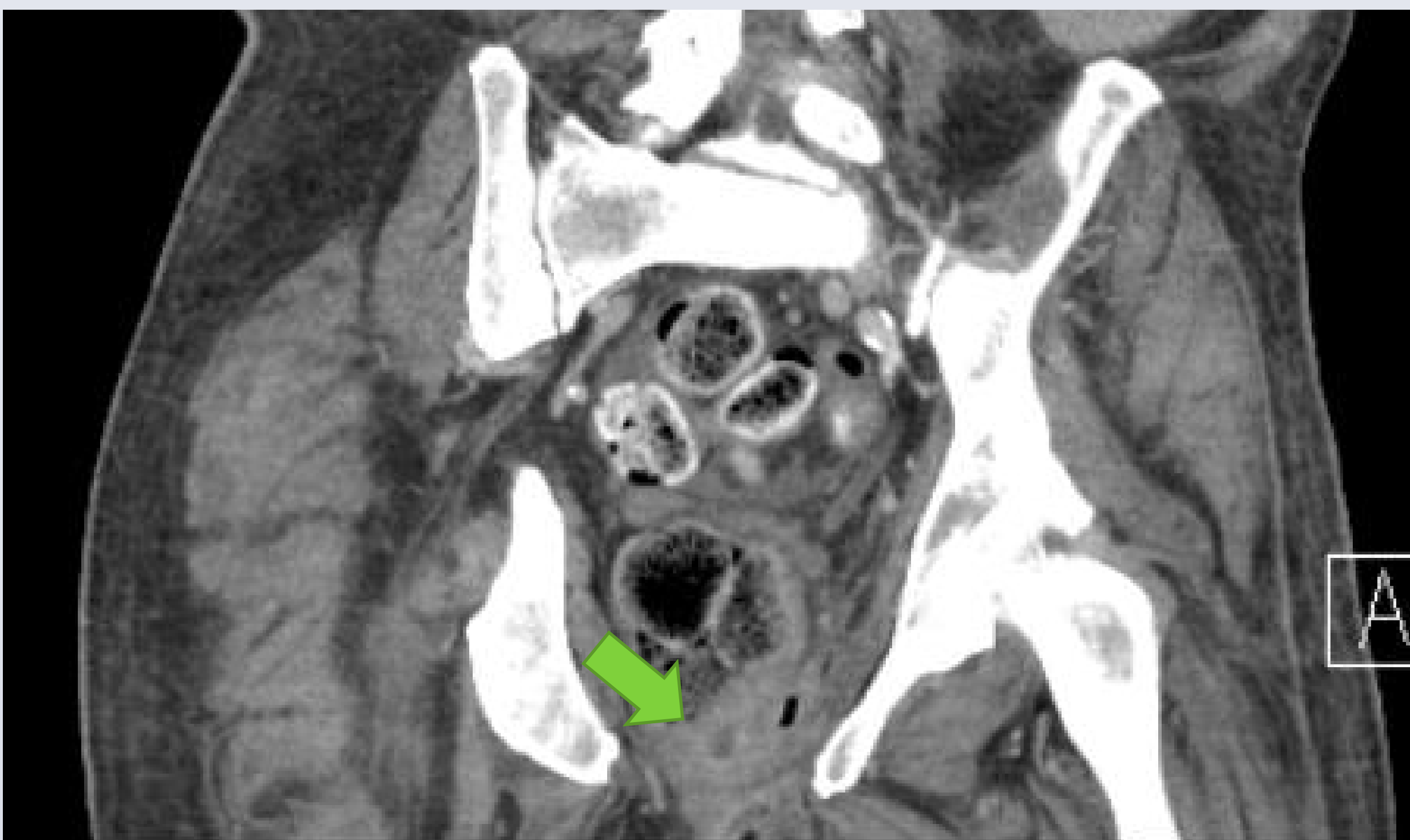
## INTRODUCTION

**BACKGROUND:** 68-year-old male nursing home patient presented to the ED feeling generally ill after a visit from his wife, and her telling the nursing home staff that he did not look well. Upon evaluation of his past medical history revealed that he was currently undergoing a workup for suspected lymphoma. Physical exam revealed pain and purulent discharge coming from the perineal area where there was a wound extending from the posterior scrotum into the perineum.

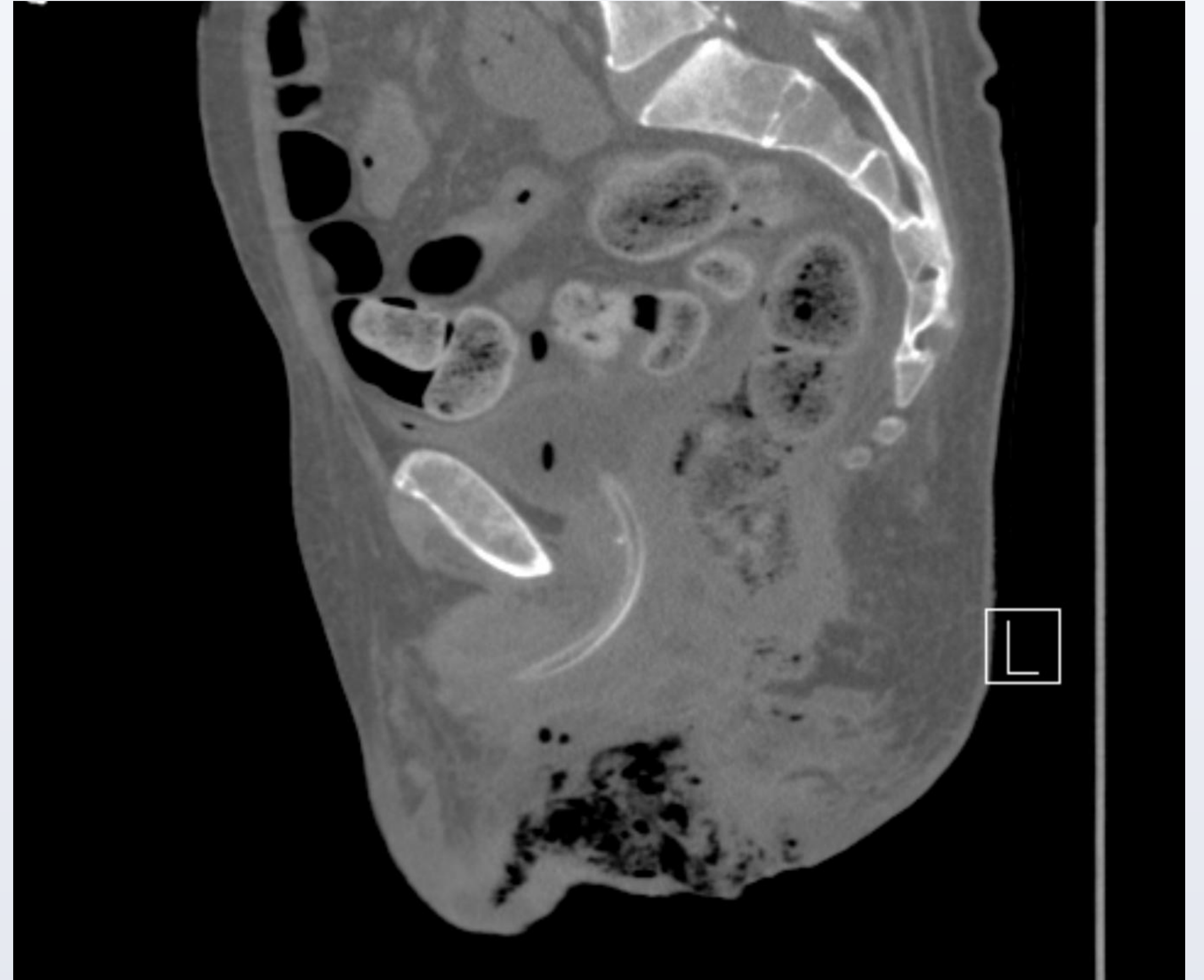
## IMAGING



CT Pelvis: Axial CT scan of the pelvis shows confluent foci of air in the perineum and subcutaneous left gluteal fold extending into the scrotum.



CT Pelvis: Contrast enhanced coronal image of the pelvis shows a peripherally enhancing perineal fluid collection with an adjacent foci of air (green arrow, upper image). Second selected coronal image highlights the indwelling Foley catheter in the bladder with air in the perineum and scrotum (lower image)



CT Pelvis: Sagittal contrast enhanced CT of the pelvis highlights the perineal air extending into the scrotum with surrounding perineal and gluteal subcutaneous fat stranding and adjacent Foley catheter. There are no intraperitoneal foci of air.

## DISCUSSION

Fournier's Gangrene is a life threatening urological emergency characterized by a polymicrobial infection which involves the perineal, genital, and perianal regions with significant morbidity and mortality. Although it was originally believed to be an idiopathic process, more recent studies have shown a strong association with advanced age, male gender, and comorbidities which predominately effect the microvascular circulation and immune function such as diabetes, and alcoholism. The infection usually begins in the genitourinary or gastrointestinal system where the infectious nidus usually becomes polymicrobial rapidly progressing to gangrene. CT is the best imaging modality because of its rapidity and ability to delineate different tissue plane involvement. Air is not necessary for the diagnosis, however a high clinical suspicion should be maintained due to the high morbidity and mortality which the diagnosis carries. Fournier's gangrene is a diagnosis that requires emergency surgical evaluation and intervention. At surgery, the fascial thickening, subcutaneous fat stranding, and subcutaneous gas found on CT correlates with the extent of affected tissue.

## REFERENCES

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2. Hagedorn JC, Wessells H. A contemporary update on Fournier's gangrene. Nat Rev Urol. 2017 Apr;14(4):205-214. doi: 10.1038/nrurol.2016.243. Epub 2016 Dec 13. PMID: 27958393.

## CONTACTS

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