

## CASE STUDY OF FOURNIER GANGRENE

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### ABSTRACT

Fournier's gangrene is necrotizing fasciitis involving genitals and perineal regions. Fournier's gangrene is a surgical emergency. If not treated immediately it spreads rapidly causing septicemia leading to death. Mainstay of treatment is surgical and regular dressing. Various dressing materials are available like Karanj taila, in our study we use karanj taila and jatyadi taila as dressing material. This is a small work to attempt to study incidence, etiology and pathogenesis and use of dressing for case of Fournier gangrene. In our study we study a male patients of Fournier's gangrene. use of karanj taila and jayadi taila dressing for the management of Fournier's gangrene. Patients name

Samada ram age 68 come to our OPD NO. 8927\298. patient was complaining about wound in the scrotum region since 4 months and there is pus discharge since last 2 months.

### INTRODUCTION

Even though Fournier's gangrene is called idiopathic gangrene, certain factors precipitate the scrotal gangrene.

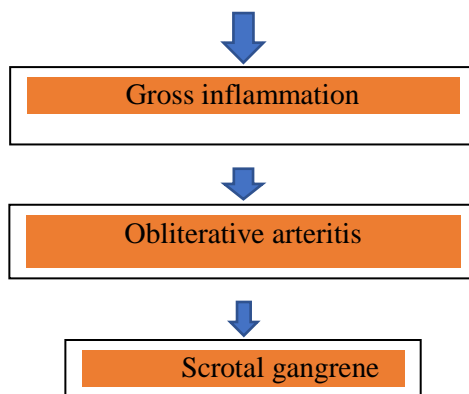
1. Low socio-economic group patients.
2. Unhygienic condition.

Following perianal abscesses. urogenital instrumentation a scratch. cut or bruise in the scrotal skin {instrumentation, injury, infection}.

Trauma, cuts, scratch, infection



Organism



## CASE

### 1. Patients description

Name : Samada Ram

Age : 68

Sex : Male

Address : Boridi ,jodhpur

### 2. Case history

Patients was complaining about pus discharge from the brust scrotum and pain and itching for whole day.

### 3. Physical Examination results

During physical examination we find the scrotum was completely brust and pus discharge from the upper and lower side of the scrotum.



Picture before the treatment of Fournier gangrene

### 4. Results of pathological testes and other investigation

1. HGB : 14.0
2. RBC : 5.40

3. PLT : 817
4. WBC: 7.93
5. HIV : Negative
6. VDRL : Negative
7. HbsAg : Negative

## 5. Treatment plan

### 1. Surgical process

Debridement of the gangrene tissue of scrotum excised and few pocket of pus drained out.

### 2. Medicine given after the surgical process

- {a} Tab. Septeline
- {b} Tab. Infexy
- {c} Tab. Fifatrol
- {d} Tab. Jay mangal ras
- {E} Sameer Pang ras
- {F} Aswagandha Churne

### 3. Dressing

Daily dressing of the scrotum region with the karanj taila and jataadi taila.

### 6. Expected outcome of the treatment plan

After the surgical process and daily dressing with karanj taila and jatyadi taila pus discharge completely cure and the skin of the scrotum was rebound again.



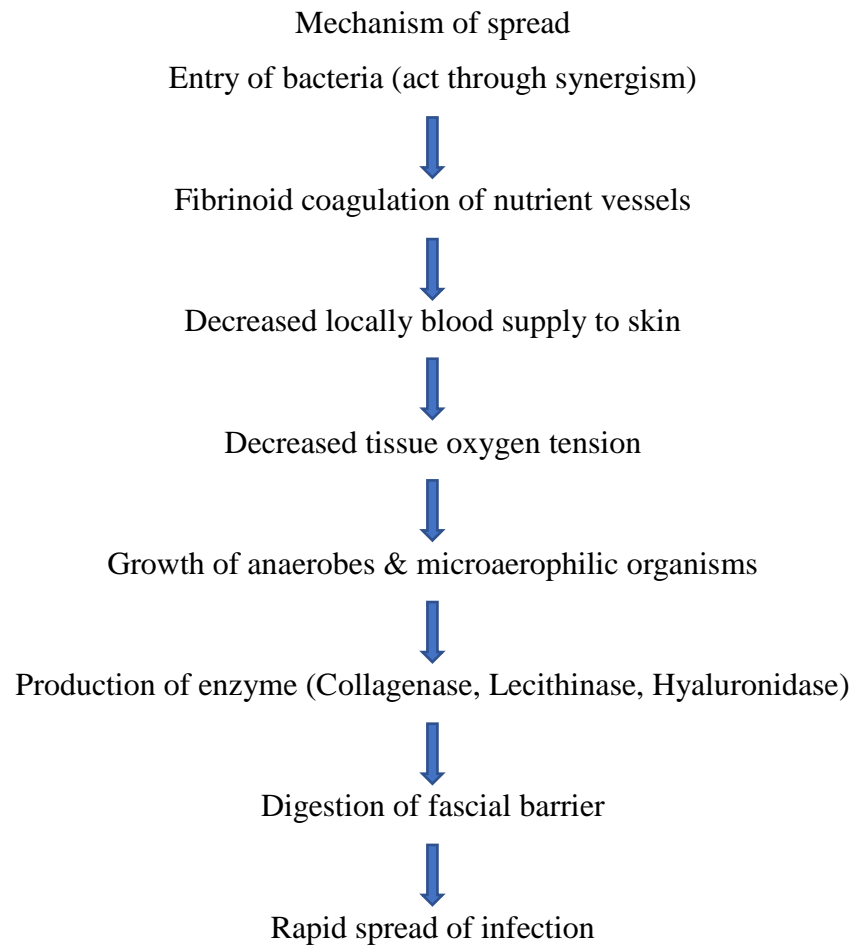
Picture after 7 days of the surgical process



Picture after 15 days of the surgical process

**Etiology****Causative organisms**

1. Microaerophilic Haemolytic
2. Streptococci Staphylococci
3. E. Coli

**Pathogenesis****CONCLUSION**

Use of the karanj taila and jatyadi taila everyday for dressing have good result in the Fournier gangrene. and used of medicine such as fifatrol and jay mangal ras have good result in the case study.