

AB171. 66. Rectal perforation and Fournier's gangrene in a polytrauma patient

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Background: Major trauma involves complex injuries that have the potential to cause prolonged disability or death. Estimated figures suggest that around 1,600 patients a year in Ireland suffer major trauma. While this is a small number when compared to the 1.1 million Emergency Department attendances, it is essential that these patients receive the best care in the best setting from the beginning. Trauma surgery in Ireland is currently planned to undergo restructuring with 2 major traumas surgical centres to be established nationally whilst currently the multidisciplinary care available at a local and regional level is imperative for successful patient management.

Methods: We describe a complex case and intensive management of a 22-year-old polytrauma patient. We include interesting preoperative, intraoperative and

postoperative images.

Results: A 22-year-old male pedestrian was brought by ambulance to a nearby general hospital following a suspected hit and run incident. Following stabilisation with ATLS protocol, the patient was transferred to a regional university hospital to manage his injuries. His main findings included a pelvic fracture requiring fixation, an iliac vessel injury requiring stenting and extensive visceral injury including a retroperitoneal haematoma and a rectal perforation. The development of Fournier's gangrene led to an extensive process of debridement and progressive reconstructive surgery well documented and illustrated in this report. Following comprehensive trauma management, this patient was successfully discharged to a rehabilitation centre.

Conclusions: Such cases highlight the challenges involved in trauma surgical care, the successful management of these complicated cases and explores the potential vulnerabilities without a formalised national trauma care infrastructure.

Keywords: Polytrauma; Fournier's gangrene; pelvic trauma; rehabilitation

doi: 10.21037/map.2019.AB171

Cite this abstract as: Kennedy N, Burke D, Sehgal R, Joyce M. Rectal perforation and Fournier's gangrene in a polytrauma patient. Mesentery Peritoneum 2019;3:AB171.