Necrotizing fasciitis (NF) is a rare soft tissue infection of the subcutaneous tissue and superficial fascia that results in rapidly progressive necrosis with secondary involvement of the skin and muscle and a high mortality. Cervicofacial NF (CNF) is an extremely rare entity, accounting for only 2.6-5% of all NF. There are several different historical descriptions and references to NF dating back to Hippocrates in 500 B.C., who described diffuse non-healing wounds. Pouteau and Gillespie in 1783 and 1785 described malignant and gangrenous ulcers, respectively. In 1871 Joseph Jones, a confederate army surgeon during the U.S. civil war, was the first to accurately describe NF calling it a “hospital gangrene” (Jones, 1871). Meleney in 1924 described 20 cases of hemolytic streptococcal gangrene (Meleney, 1924). Wilson in 1952 coined the term necrotizing fasciitis (Wilson, 1952). Yet, there is very little information on presentation, management and outcome of patients with NF specifically involving the head and neck. NF is classified as one of three types based on microbiologic findings: Type-1 is a polymicrobial infection with a combination of anaerobic and aerobic bacteria, Type-2 is a monomicrobial infection mainly due to group A beta hemolytic streptococci (GAS) and less commonly other streptococci and staphylococci and type 3 is a monomicrobial infection due to marine vibrios. The clinical manifestations of NF include: Swelling, redness, pain, fever, blebs, bullae and crepitus. CNF is most commonly a sequela of odontogenic infection. Less commonly CNF may occur as a consequence of soft tissue trauma. It may rarely occur in the absence of a known inciting factor or a known portal of entry of bacteria as was true in one of our patients (case #1). The spontaneous occurrence of necrotizing fasciitis has been reported to account for up 20% of patients. Cervicofacial necrotizing fasciitis is a rare disease associated with a high morbidity and mortality. Early diagnosis and rapid aggressive radical surgical treatment are the main factors associated with reduced morbidity and mortality.

Biography

Alan Y Martinez has completed his Dental degree in Honduras and his Oral and Maxillofacial Surgery Residency in Peru. He is currently in charge of the division of oral and maxillofacial surgery at the MetroHealth System a level 1 trauma center in Cleveland, OH. He has published 6 articles in English and Spanish in different oral and maxillofacial surgery topics and he is a Reviewer of several journals.

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