Chirurgia (Bucur). 2014;109(5): 693-696

**Peristomal Necrotizing Fasciitis - Peculiar Evolution of a Patient with Metachronous Colonic Tumors**

I.T. Marin[1], H. Doran[1], R. Zaharia[1], L. Lupu[1], T. Panazan[2], I. Brezean[1]
[1]"Prof. I Juvara" Surgical Department, "Dr. I. Cantacuzino" Clinical Hospital, Bucharest, Romania
[2]Department of Reconstructive Surgery II, Emergency Clinical Hospital of Plastic Surgery and Burns, Bucharest, Romania

**Abstract**
We hereby present a case report of a patient with an unusual neoplasic and surgical history. M.V. is a 54-year-old patient who had been operated, two years ago, for intestinal obstruction caused by a sigmoid tumor; a segmental rectal and sigmoid resection (Hartmann's procedure) was then performed. Two other surgical procedures were attempted during the last two years, in another surgical department: a colo-rectal anastomosis and a repair of the parastomal hernia, both failed due to postoperative adhesions syndrome. The patient was hospitalized for peristomal gangrene with necrotizing fasciitis. Emergency action was taken to resolve the parietal gangrene. The post-operative local evolution of the wound was favourable and allowed a skin graft for parietal restoration. An intestinal obstruction occurred 2 months later, caused by an extended metachronous tumor of the splenic flexure. The patient underwent other surgeries including the completion of the left hemicolectomy, total gastrectomy, caudal splenopancreatectomy and left adrenalectomy. The patient has a favourable post-operative evolution after 1 year.
*Conclusion:* We noticed a very severe evolution of the peristomal gangrene and the rapid growth towards intestinal obstruction of the metachronous colonic tumor.
**Key words:** necrotizing fasciitis, metachronous colon tumors

Corresponding author: Asoc. Prof. Horia Doran
"Dr. I. Cantacuzino" Clinical Hospital
"Prof. I Juvara" Surgical Department
Bucharest, Romania
E-mail: doranh2003@yahoo.com