

EPINEPHRINE SOAKED GAUZE INDUCED CUTANEOUS CONGESTION MIMICKING WET GANGRENE: A CASE REPORT

¹Siek IM; ¹Nur Amirah A; ²Ngiam CJ; ¹ Kamalruzaman MA

¹ Department of Orthopaedics, Hospital Enche Besar Hajjah Khalsom, Kluang,

² Department of Orthopaedics, Hospital Sungai Buloh, Selangor

INTRODUCTION:

Application of temporary epinephrine soaked gauze for minor orthopedic procedures is common. It can provide temporary post-operative bloodless field through hemostasis.

REPORT:

A 29-year-old healthy lady, presented with bluish discoloration and multiple blisters over her left ring finger mimicking wet gangrene following wart removal over ulna side of her left ring finger two days ago. She was given 2% lignocaine and covered with epinephrine soaked gauze as dressing for 2 days. Upon examination, there was superficial skin separation with hemerosous fluid from the proximal interphalangeal joint distally, which presented as multiple blisters. However the capillary refill and spo2 of the digit are normal. (FIGURE 1).

In ward, finger deblistering was done under local anaesthesia. She was given intravenous cloxacillin 1g for 7 days and local intravenous revascularization protocol was commenced for one week. She was also treated with regular wound care. Over the next several weeks, the patient was monitored closely. She continued with local wound care. Two months after the initial presentation, cutaneous congestion gradually resolved and she was discharged well. (FIGURE 2)

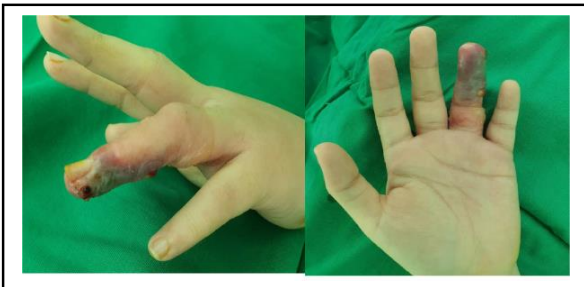


Figure 1: DURING ADMISSION



Figure 2: DURING FINAL FOLLOW UP

CONCLUSION:

This case highlights the importance of proper and cautious use of epinephrine soaked gauze as temporary hemostatic dressing. Although literature has shown that epinephrine is generally well tolerated in the digits, our case report reflects the potential and possible complication if epinephrine soaked gauze is left for long duration of time.

REFERENCES:

1. Hong et al : Journal of Hand Surgery Global Online 3 (2021) Pg 215-217
2. Aljahany M.S. et al: Am J Case Rep, 2020; 21: e923877
3. Jacques X. et al: J Hand Surg Am. (2017); Pg119-123.
4. Ceren et al : Indian J Otolaryngol Head Neck Surg. 2016 Dec; Pg 391–395
5. Salman et all: DOI: 10.12788/emed.2018.0090