



Some streptococci and in particular *Streptococcus pyogenes* may cause severe and life-threatening infections. These include: streptococcal toxic shock syndrome (rapidly progressive symptoms with low blood pressure and multi-organ failure), blood poisoning and severe skin infections.

We at The Lee Spark NF Foundation will continue our work raising awareness by education and research and will be part of on-going research projects to learn and progress to save lives.

#### Contact:

We hope we have answered some of your questions and that we have helped at this very traumatic time.

If you require any further details of our work or support please do email us.

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#### Severe Streptococcal Infections & Necrotising Fasciitis Support

The support group was founded in January 2000 as a result of Doreen Marsden losing her dear son aged 23. His name was 'Lee Spark'.

He died from a *Streptococcus milleri* infection that developed into a life threatening infection necrotising fasciitis (known as the flesh-eating bug and gangrene).

The aims of the charity are to raise awareness by means of education so that a higher profile of NF may be raised in order that more lives may be saved.

The support group offers information and support to survivors, bereaved, also friends and families of this horrific infection also medical clinicians at all levels of care.

Some of the questions you may already be asking are:

### What is necrotising fasciitis (NF)?

The term necrotising fasciitis comes from the words 'necrosis', which means death of a portion of tissue (flesh) and 'fascia', the name given to the sheets or bands of fibrous tissue which enclose and connect the muscles. NF is a severe infection involving the soft tissues below the skin, particularly the fascia. It can affect any part of the body but is most common on the legs. NF may be caused by a number of bacteria; one of these is *Streptococcus pyogenes* also known as Group A *Streptococcus*. *Streptococcal necrotising fasciitis* can also be a healthcare-associated infection with many unreported cases in this country each year. The mortality rate in some areas can be as high as 50–76%.

### What are the symptoms of NF?

NF may begin in an established wound (following either injury or surgery) or broken skin such as a leg ulcer even a knock or bruise. Thus being an everyday medical incident. Excessive pain is an early warning symptom. Bacteria spreads very rapidly in the tissues below the skin surfaces, well ahead of any visible changes in the overlying skin. Infection may progress at inches per hour; the patient rapidly becomes unwell with flu like symptoms, possible vomiting and diarrhoea with progressive deterioration out of all proportion to the visible changes in the skin of the infected area. If not treated very quickly, the skin over the affected area becomes dusky and purple; blisters may form and the skin dies. By this stage, infection may have penetrated deep into the underlying tissues. Patients often develop shock, with collapse, low blood pressure, and failure of the liver, kidneys and other vital systems.

### Predisposing Factors

- Diabetes
- Surgery
- Mild trauma
- Fungal infections
- Low immunity
- Drug abuse
- Non steroid anti-inflammatory drugs
- Steroids
- Bites
- Haemorrhoids

### Treatment of Necrotising Fasciitis

- Treatment may involve several of the following:
- Debridement
  - Hyperbaric Oxygen Therapy
  - Induced Sedation
  - Amputation
  - Plastic Surgery
  - Skin Grafts