GOUTY PANNICULITIS:
A CASE REPORT.

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INTRODUCTION

Gouty panniculitis, with deposits of urate crystals in the subcutaneous tissue, is a rare dermatologic condition. We report a case with this disease.

CASE

A 60-year-old man with Hyperuricemia, previous colecistectomy, chronic ischaemic syndrome (operated by aorto-femoral by-pass) who presented an increase of serum uric acid level and ulcer with inflammatory and infection signs in the fifth metatarsal bone of right foot and significant pain.

*Citrobacter, hafnia alveoli* and *serratia* were recovered from the deep wound swab. At the same foot (first metatarsus) the patient has an ulcer with the same appearance and proteus was recovered. The patient was afebrile. A plain radiograph of the foot not revealed active osteomyelitis.

The pain was higher related probably for hyperuricemia. Inside the ulcer, we can observe many pieces of crystal uric acid. Therapy with ciprofloxacin, clopidogrel, omeprazole, colchicine, allopurinol, tramadol and local treatment with autolytic debridement, silver-containing Hydrofiber® dressing (Aquacel™ Ag), and secondary dressing.

After one month with this therapy, the ulcer in the fifth metatarsus was debrided by means of Varihesive® Hydrogel. However, the other ulcer needed a mechanic debridement.

After four months of treatment, an increase of granulation tissue and reduction of wound's deep was observed in both ulcers.

1st December 2005, vascular surgeon decided to not carry out a bypass femoral, since the evolution of fifth ulcer was good and the patient didn’t need medication of morphine.

In the next picture, it can observe the appearance of the first metatarsus wound, after 7 months of treatment:

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At the same time fifth metatarsus was healed.

At this moment, Varihesive® Extra Thin was applied to protect the newly-formed tissues.

CONCLUSION

We reviewed the literature in order to find other similar cases and we find that it is a rare and not very studied disorder because we only found three cases. Is for that, we have checked that Hydrofiber® dressing with ionic silver jointly with Varihesive® Hydrogel as autolytic debridement, is a better treatment to heal gouty panniculitis wounds. With this treatment, patient’s pain and wound’s size were reduced in a few months.