

Woman's Ordeal Underscores the Fragile Nature of Good Health

By Jennifer Wake



Alecia Larson takes a well-deserved outing one month after returning home from the hospital Photo provided by Larson

ast December, Moraga resident Alecia Larson, 47, was finishing up what she said was a normal day: a tennis lesson at Moraga Country Club in the morning. "Afterward, I felt a little tired," she said. "I didn't think anything of that."

Later in the afternoon, she felt really exhausted and came down with a 103 degree fever and uncontrollable chills. "I have felt tired and exhausted before in my life, but this was a feeling I had never felt before," she said. "I knew something was terribly wrong."

Feeling better the next day, Larson went about her normal routine, but that afternoon she was overcome by a sharp pain in her lower right abdomen and a few hours later by a debilitating pain behind her right knee. Larson's husband, Spencer, rushed her to the emergency room.

After days of diagnostic tests and blood work, the John Muir Medical Center emergency room surgeon on call, Dr. Gregory Rhodes, told Larson's husband that he "had a bad feeling" about what this could be and said he wanted to do immediate exploratory surgery on her knee; that time was of the essence.

"He then told my husband he would have to 'do what he needed to do' once he got in there," said Larson, who by then had been transferred to the ICU. She was diagnosed with necrotizing fasciitis (NF) – more commonly known as the flesh-eating bacteria. "Luckily, Dr. Rhodes had experience treating NF and in my case he caught it early," she said.

Necrotizing fasciitis is a destructive infection of muscle and fat

tissue. According to the U.S. Centers for Disease Control (CDC), NF is caused by the Group A Streptococcus (GAS) bacterium commonly found in the throat and on the skin that comes in direct contact with infected wounds or sores.

The CDC states that GAS can be present in the throat or on the skin, yet cause no symptoms of disease. "The majority of GAS infections are relatively mild, such as 'strep throat' or impetigo," the CDC states on its Web site. "Occasionally, however, these bacteria can reach parts of the body where bacteria are not usually found, such as the blood, deep muscle and fat tissue, or the lungs, and can cause invasive infections."

Dr. Rhodes drained fluid from Larson's leg and restored blood flow to the infected area so the antibiotics would work. Fortunately, no significant tissue had to be removed.

Larson was extremely lucky. Although NF is an extremely rare condition, with only 500 to 1,500 cases occurring annually in the United States, once contracted more than 20 percent of patients with NF die, and survivors are often left with massive tissue loss causing significant disfigurement and/or disability.

Like many patients who contract NF, the initial cause is often unknown. Larson had nicked her right shin in the last week of November, and although she continued to change the bandage, it did not heal. Larson's doctors cultured the razor nick and could not conclusively prove it was the point of entry for the infection, but were confident there was no other probable point of entry.

To avoid contracting NF, the CDC suggestion is simple: thoroughly wash your hands, especially after coughing and sneezing and before preparing foods or eating.

"Persons with sore throats should be seen by a doctor who can perform tests to find out whether the illness is strep throat," the CDC states. "If the test result shows strep throat, the person should stay home from work, school, or day care until 24 hours after taking an antibiotic. All wounds should be kept clean and watched for possible signs of infection such as redness, swelling, drainage, and pain at the wound site. A person with signs of an infected wound, especially if fever occurs, should seek medical care."

While NF is very difficult to get in the first place, Larson said there are a few precautionary things she took away from this ordeal. "Never ignore a high fever as an adult. A sharp, burning pain in a muscle that is not an obvious muscle pull or strain is cause for alarm. And don't wait – get to the emergency room."

After undergoing two surgeries, a massive round of antibiotics, and a nine day stay in the hospital, Larson is now back on the tennis court enjoying life.

"I was released from the hospital with some surgical scars and a grateful heart," she said.

For more information about necrotizing fasciitis, you can visit the CDC's Web site at http://www.cdc.gov/ncidod/dbmd/diseaseinfo/groupastreptococcal_g.htm.