

# Having surgery to treat tissue in a bacterial infection (necrotising fasciitis)

Burns and Plastics Treatment Centre

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Information for Patients

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## What is necrotising fasciitis?

Necrotising fasciitis (NF) is an infection caused by a germ (bacteria). It affects the tissue under the skin and the muscle and organs (fascia) around it.

It is sometimes called the 'flesh eating' disease. This bacteria does not eat the flesh. It lets out poisons (toxins) that damage nearby tissues.

NF is a rare but serious condition that can affect anyone.

## What are the symptoms?

The symptoms of NF can happen quickly making you feel unwell. NF can happen from a break in the skin like a cut, graze or abscess to the skin.

Symptoms can be:

- intense pain that feels greater than the damaged skin.
- a high temperature, flu-like symptoms or feeling unwell.
- diarrhoea and being sick (vomiting).
- the skin over the infected areas may have blisters with the skin turning from red to purple and black.
- swelling in the painful area. It often feels firm when you touch it.

**Health information and support is available at [www.nhs.uk](http://www.nhs.uk)  
or call 111 for non-emergency medical advice**

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## What are the causes?

NR can be caused by many different types of bacteria. There are 4 types of infections:

- Type 1: this is the most common and caused by a mixture of bacterial types.
- Type 2: made up of 1 to 2 types of bacteria.
- Type 3: a bacteria found in salt water; a rare cause.
- Type 4: fungal.

Many of these bacteria live in the gut and throat. In some people it can live on the skin where it will not cause any serious problems. It is only in rare cases that the bacteria can enter into deep tissue by the blood stream or by an injury. This happens through cuts and grazes, insect bites, surgical wounds, and puncture wounds.

You will have a blood test and scans to confirm that you have NF. We may also do a 'finger sweep test'. This is where we make a small cut on the skin and use a gloved finger to explore the area. We will then do an operation to check the affected tissue.

## How is it treated?

We treat NR in hospital. The main treatments are:

- **surgery to remove infected tissue.** We may have to repeat this. After we treat and remove the infected area, you might need surgery to repair the affected area. We do this with a skin graft (see leaflet 478: 'Care of your skin graft and donor site'). This will cover the open wounds. Sometimes we have to remove the infected limb (amputation) to stop the spread of infection.
- **antibiotics** used to treat the infection.
- **supportive treatment.** This includes treatment to control your blood pressure, fluid levels and organ functions.

You will be in an Intensive Care Unit (ICU). You may need to stay in hospital for a number of weeks/ months. During this time you will have had regular dressing changes. This could include vacuumed assisted closure (VAC) (please see the VAC leaflet). Dressing changes can be painful so painkillers may be needed. These will be provided by the nurse looking after you.

## What to expect on the ward?

We will move you from the ICU to a ward. We will closely monitor you. The doctors, nurses and all members of the multidisciplinary team (MDT) will work with you. Physiotherapists, occupational therapists and dietitians will help with your recovery. We will try to get you back to how you were before.

The medical and nursing teams will check on you regularly and change your dressings. You will stay on the ward until you are well enough to be discharged out of hospital. This may be back to home or to a smaller community hospital for more support and rehabilitation. The burns and plastics specialist nurses will follow you up to help with dressing changes. The occupational therapists (OT) will support you with your ongoing scar therapy if needed.

## What are the long term effects?

Recovering from NR can have long term effects on your physical and mental/ emotional wellbeing.

### Physical:

- Your scar will have a different look and texture to the rest of your skin. It may become tight, itchy and sometimes painful. Your OT will do assessments and give support if needed. Wound healing can sometimes take a long time with small areas of unhealed skin staying months after recovery.
- While in hospital you may have lost weight/ muscle tone. We may advise you to take nutritional supplements with your diet. We may also recommend a high protein diet to help with wound healing. The specialist nursing team will review you until your wound is fully healed.

### Mental/ emotional:

Many patients have some level of mental and emotional (psychological) distress. This can be:

- being less confidence in your appearance.
- worrying about what other people will think or say about your scars.
- low mood or depressed feelings. You may get upset when thinking or talking about what happened.

Some of these problems can slowly go away. But sometimes it can cause distress and effect your life. We can give psychological support or treatment to help you cope with these feelings. If you are in hospital, you can talk about these issues. After leaving hospital your GP will be able to give support.

## More information and support

- The Lee Spark NF Foundation offer support and education around necrotising fasciitis: [nfsuk.org.uk](http://nfsuk.org.uk)
- For more information visit the NHS website: [www.nhs.uk/conditions/necrotising-fasciitis/](http://www.nhs.uk/conditions/necrotising-fasciitis/)

