

Pyoderma gangrenosum

Introduction

Pyoderma gangrenosum is a rare, treatable skin disease. The name was given to the disease many years ago but the disease is not related to gangrene. Pyoderma gangrenosum is not 'catching' and cannot be transferred from or to anyone by touching or in any other way.

What are the signs of pyoderma gangrenosum?

The way pyoderma gangrenosum looks can vary from person to person. Not everyone will have the same signs and symptoms as those mentioned below, but these are some of the most common ones:

- Broken skin, which can ooze
- Wounds/ulcers, which often increase rapidly
- Discoloured wound edges (may look purplish)
- Pain at the site of the ulcers (can be quite severe)

What causes pyoderma gangrenosum?

Sometimes other diseases may be associated with pyoderma gangrenosum, such as inflammatory bowel disease (IBD) or arthritis. It is important to know that having pyoderma gangrenosum does not mean that you have these diseases. For around half of the people affected there is no known cause, but trauma to the area may be a reason. Pyoderma gangrenosum may happen around a stoma, where an appliance has to be repeatedly applied and removed.

Can I be tested for pyoderma gangrenosum?

There is no definitive test for pyoderma gangrenosum. The doctor or specialist nurse with experience of the disease may be able to diagnose it by the ulcers appearance. A blood test or a biopsy (sample) may be taken from the ulcer/wound itself. These tests may help to exclude other problems and determine the most appropriate treatment.

What is the treatment for pyoderma gangrenosum?

There are many different treatments that can be used. These may include one or more from the list below:

- Steroids (cream or tablets)
- Treatment for a related disease such as IBD
- Antibiotics, if there is also an infection (cream or tablets)

- Surgery, such as drainage of sepsis (infection) or removal of diseased bowel

There is no need to avoid bathing or showering if you have pyoderma gangrenosum. However, it is wise to avoid getting soaps and bath bubbles on the area. Salt baths are not a good idea as they dry the skin.

It is important to realise that treatment may take some time to completely heal the broken skin. Pyoderma gangrenosum can occasionally be difficult to treat. More than one treatment may need to be tried before the right treatment is found. If after a week or two of treatment the disease gets worse or does not improve, you should go to see your doctor or specialist nurse again. Usually, once the treatment begins to work, symptoms, such as pain, quickly improve. Until then, you may need to take some painkillers.

Pyoderma gangrenosum can recur after treatment. Prevention of the disease is difficult because the causes are not fully understood. If you think that the pyoderma gangrenosum has recurred, see a doctor quickly, so that treatment may be given sooner. Often the same treatment will work for you again.

What do I need to do if the pyoderma gangrenosum is around my stoma?

If the pyoderma gangrenosum is around your stoma please contact your stoma specialist nurse for advice.

Contact details

Stoma specialist nurses at St. Mark's hospital
020 8235 4110

Pouch care team at St. Mark's Hospital
020 8235 4126

Inflammatory bowel disease nursing team
020 8869 4155

General Trust Information

Patient Advice and Liaison Service (PALS)

PALS is a confidential service for people who would like information, help or advice about the services provided by any of our hospitals. Please call 0800 783 4372 between 10am and 4pm or e-mail lnwh-tr.PALS@nhs.net. Please note that this service does not provide clinical advice so please contact the relevant department directly to discuss any concerns or queries about your upcoming test, examination or operation.

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