

AUTHOR'S REPLY

We commend Djedovic and colleagues⁽¹⁾ on their innovative technique and excellent results. Necrotising soft tissue infections can be life-threatening, and in areas like the perineum, they can be difficult to treat. While early debridement and antibiotic therapy are mainstays in the treatment of these infections, adjuncts have been developed to improve healing and shorten hospital stay. The use of the sandwich technique on negative pressure wound therapy certainly lends itself to ultimately achieving wound closure. Our original case report⁽²⁾ shows the options and synergy of different forms of treatment, and is sometimes necessary in difficult patients with multiple comorbidities such as diabetes mellitus. We will certainly take their letter into account for treating future cases.

Yours sincerely,

Adrian Ooi

Department of Plastic, Reconstructive and Aesthetic Surgery, Singapore General Hospital, Outram Road, Singapore 169608. ooi.adrian@gmail.com

REFERENCES

1. Djedovic G, Engelhardt TO, Rieger UM, Pierer G, Kronberger P. The sandwich technique for vacuum-assisted wound dressing application in the urogenital region: a safe, time-sparing and reliable method. *Singapore Med J* 2012; 53:294.
2. Ooi A, Chong SJ. Use of adjunctive treatments in improving patient outcome in Fournier's gangrene. *Singapore Med J* 2011; 52:e194-e197.