Dry Digital Gangrene

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A 61-year-old man presented to a clinic with the complaint of 6 weeks of right middle finger pain and swelling. His medical history included type 2 diabetes mellitus, hypertension, peripheral arterial occlusive disease, and chronic kidney disease. The patient received dialysis through an arteriovenous fistula in his right arm. The right middle finger became gangrenous after 8 weeks (image A). Postpresentation arteriogram records indicated steal syndrome causing vascular insufficiency in all right hand digits (image B). The right middle finger autoamputated a few weeks later.

Hemodialysis is a common risk factor for ischemia of the upper extremity, and amputation is a common sequelae.¹ Studies have shown that currently the best management of dialysis-associated steal syndrome is distal revascularization with interval ligation, which involves ligating an artery

distal to the fistula and subsequently forming a bypass.² Owing to the high mortality rates of dialysis patients who require upper extremity amputations, early revascularization efforts are key.³ (doi:10.7556/jaoa.2018.166)

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