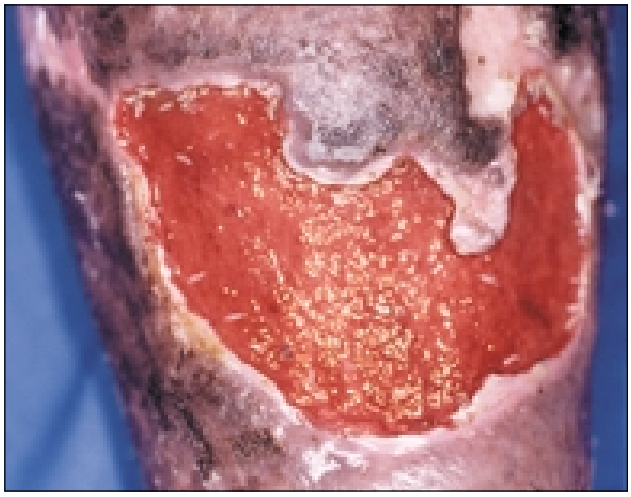
Maggots in ulcers: friend or foe?

A 53-year-old man was admitted to the Tung Wah Hospital in May 1999 to receive treatment for a venous ulcer on his left leg. The ulcer measured 12 cm in diameter. Wound swab culture yielded a mixed growth of *Pseudomonas aeruginosa* and coliform bacilli. On the day after admission, maggots were found emerging from the edges of the ulcer (shown below). Hydrogen peroxide was used to irrigate the ulcer for 2 days; the maggots were then exterminated. By applying regular dressings, the ulcer has been healing satisfactorily.

Humans become infested with maggots when flies lay eggs on wounds: a process known as myiasis. Maggots usually do not invade healthy tissue, but the larvae of certain fly species can be pathogenic. Maggots should be removed upon their discovery, as concomitant infection by anaerobes can be fatal.[1]



To identify the fly species, maggots should be collected live and reared to the adult form.[2]

The therapeutic benefit of maggots has been recognised for centuries.[3,4] Maggots feed on necrotic tissue and remove slough; hence, they constitute a cost-effective method of wound debridement.[5] Sterile maggots of the common greenbottle fly (*Lucilia sericata*) have been produced commercially,[6] and special dressings have been designed to keep maggots alive on ulcers.[7] Maggot therapy can be considered in the management of necrotic ulceration that has failed to respond to conventional modalities of treatment.

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Photographs for Pictorial Medicine

We invite readers to submit clinical photographs for publication in the Pictorial Medicine section of the ***Hong Kong Medical Journal***. These should be clear photographs from interesting, informative, or unusual cases, accompanied by one paragraph of summary case detail, a brief background, and up to five relevant references (in the Vancouver style).

Please send contributions as double-spaced text with two sets of photographs, preferably in colour, to the Managing Editor, *Hong Kong Medical Journal*, 10/F, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong, China. Submissions must include signed consent to publication from the patient (forms are available from the Journal website <http://www.hkmj.org.hk>) and may be edited before publication.