CASE REPORT

• 35-year-old primipara presented in the OPD with h/o lower abdominal pain
• Laparoscopic left salpingectomy done for ectopic pregnancy rupture of the left fallopian tube. 1litre blood aspirated but large clots remained
• Postoperative recovery was uneventful
• Patient discharged on 7th POD
CASE REPORT . . .cont.

• 19 POD, she **returns to hospital** with h/o lower abdominal pain, anorexia and fever
• Diagnosis of infection related to residual hematoma made; antibiotics started
• Temperature remains high
• CT reveals **abscess** in left lower abdomen
• **CT-guided drainage of abscess** performed with pyretolysis
INTRAPERITONEAL ABSCESES

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INTRAPERITONEAL ABSCESES - PREAMBLE

- Definition
- Causes
- Clinical features
- Complications
- Investigations
- Treatment
INTRAPERITONEAL ABSCEESS - DEFINITION
INTEGRAPERITONEAL ABSCESS
Localized collection of pus in the peritoneum
INTRAPERITONEAL ABSCESS - CAUSES
INTRAPERITONEAL ABSCESS - CAUSES

Follows intraperitoneal sepsis, usually manifesting first as local or diffuse peritonitis
INTRAPERITONEAL ABSCESS - CAUSES

• Anastomotic leak after surgery
• Failure to manage localized faecal or other contamination during operation
• Organ perforation and walling off of the defect by the omentum and adjacent bowel loops
BOWEL PERFORATION AND WALLING OFF OF THE DEFECT BY THE OMENTUM / ADJACENT BOWEL LOOPS

• Appendicular perforation; local / pelvic abscess
• Diverticular / colonic perforation: pericolic abscess
• Gall bladder perforation: Right subphrenic abscess
• Posterior gastric ulcer perforation: lesser sac abscess
COMMON SITES FOR RESIDUAL ABSCESSES

1 Subphrenic
2 Paracolic
3 Right iliac fossa
4 Pelvic
INTRAPERITONEAL ABSCESS – CLINICAL FEATURES
INTRAPERITONEAL ABSCESSES
-CLINICAL FEATURES

• Lassitude, malaise
• Anorexia, weight loss
• Failure to recover from surgery as expected
• Low to high grade fever
• Tachycardia
• Localized tenderness
• Palpable mass (large abscess)
• Specific features
PELVIC ABSCESS

- Pelvic pain
- Diarrhea with passage of mucus in stools
- Bulging of anterior rectal wall
SUBHEPATIC ABSCESS

- Epigastric fullness and pain
- Pain on ipsilateral shoulder
- Persistent hiccoughs
INTRAPERITONEAL ABSCESS COMPLICATIONS
INTRAPERITONEAL ABSCESS - COMPLICATIONS

- Rupture with generalized peritonitis
- Erosion of blood vessels
- Bacteremia/toxaemia, SIRS, MODS and death
INTRAPERITONEAL ABSCESS - INVESTIGATIONS

- X-ray chest
- Ultrasound abdomen
- CT scan
- Labelled WBC scintigraphy
INTRAPERITONEAL ABSCESS – TREATMENT
LABELED LEUKOCYTE SCINTIGRAPHY
• Ultrasound / CT guided percutaneous aspiration, catheterization and antibiotics
• Drainage through rectal / posterior fornix of vagina (for pelvic abscess)
• Surgical drainage
ULTRASOUND / CT GUIDED PERCUTANEOUS ASPIRATION, CATHETERIZATION AND ANTIBIOTICS
OPENING A PELVIC ABSCESS INTO THE RECTUM
INDICATIONS FOR OPEN SURGERY

• Multiple large abscesses
• Abscesses that cannot be drained percutaneously
• Abscesses with intra-abdominal pathology requiring surgery
• Pointing of abscess with edema or redness
SUMMARY

- Definition
- Causes
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- Complications
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- Treatment