

Abscesses

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MR Revision slides

What is an abscess?

- A collection of Pus
- Can be anywhere
- Manage with drainage +/- antibiotics
 - In skin usually staph infection
 - Dental abscesses tend to be strep and anaerobes
 - Others tend to depend on what they come from
- Internal abscesses are walled off collections eg following a localised diverticular perforation or gallbladder perforation.

Focusing on skin - definitions

 Pus = exudate, yellow, brown, green. Contains white cells, bacteria, tissue debris and serum Cyst = Abnormal sac of material, fluid or air.



https://poppingpimple.com/tag/home-remedy-for-ingrown-hair-on-legs/



http://www.skinevolutions.co.uk/sebaceous-cysts/

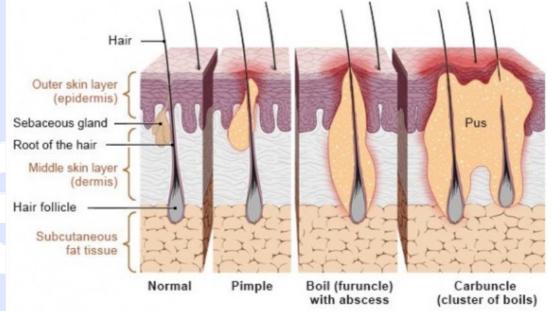


https://www.healthline.com/health/skindisorders/pilar-cyst

Focusing on skin - definitions

 Boils = a deep folliculitis leading to localised cellulitis +/- pus Carbuncle = painful collection of boils connected under the skin, usually in hairy areas.







https://millerfamilydermatology.com/wha t-is-mrsa-anyway/carbuncle/

https://www.geni.com/projects/Carbuncle/59078

Focusing on skin - definitions

- Granuloma = small benign nodule, from inflammation leading to localised aggregation of histiocytes.
- Hidradenitis Suppurativa = recurrent boils to axilla and groin



https://www.childrens.com/specialtiesservices/conditions/pyogenic-granuloma



https://www.medscape.com/viewarticle/908922

https://www.doctors.net.uk/eClient/dnuk/hidradenitis_suppurativa_BAD/index.html

- Relatively common but hidden disease.
- Female predominance, increased frequency in black population.
- Associated with:
 - increased cardiovascular death,
 - T2DM,
 - Hyperlipidaemia,
 - HTN,
 - Acne,
 - Pilonidal sinus and
 - Crohn's disease.

- Long term sequelae:
 - Lymphoedema,
 - Fistulating perianal disease
 - Anaemia
 - Cutaneous SCC
- Some evidence familial links
- Hormones increase issues but not clear why
- Obesity makes it worse probably increased friction at flexures
- Nicotine induces follicular plugging and epidermal hyperplasia

Hidradenitis Suppurativa

- chronicity = 2 lesions in last 6/12 and a lifetime history of ≥5.
- The Hurley system is the most commonly used to record baseline severity, divided into:
- mild disease (stage I) isolated lesions
- moderate (stage II) recurrent lesions with sinus tracts and scarring
- severe disease (stage III) multiple lesions coalescing into extensive plaques involving most of the affected region

- Very associated with anxiety and depression
- Painful
- Malodourous
- Inhibits close human contact
- Screen for depression
- Appropriate dressings prescribed
- Screen for associated illnesses
- Lifestyle advice and support

Management

- Medical:
- Initially tetracycline eg Lymecyclin or doxycycline for 12 weeks.
- If no response or stage 3 disease rifampicin and clindamycin
- If no response, dapsone or acitretin (males or infertile females)
- Still no response adalimubab
- Then Infliximab
- Add in metformin if T2DM, PCOS or pregnant

- Surgical
 - Sometimes asked to drain abscesses
 - Sometimes need to excise large areas of tissue and replace with skin flap



Figure 2. Patient after surgery to right axilla, with excision of area of hidradenitis and partial thickness skin graft

Don't assume all red swellings are an abscess

Scrofuloderma = direct
extension of TB in lymph nodes,
bone or joints. Firm, painless
lesions the ulcerate with
granular base



https://dermnetnz.org/topics/cutaneous-tuberculosis/

 Sarcoma = cancer – fixed painless lump



https://orthop.washington.edu/patient-care/articles/oncology/soft-tissue-masses.html

https://dermnetnz.org/image-catalogue/lesion-tumour-and-cancer-images/?stage=Live



Merkel cell carcinoma



Sebaceous carcinoma



Metastatic melanoma



Sebaceous naevus with basal cell carcinoma