

## NON-INVASIVE MANAGEMENT OF INTRAMUSCULAR ABSCESS

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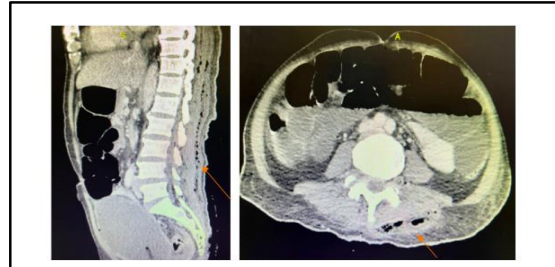
### INTRODUCTION:

Drainage is always the answer to an abscess. There are many ways to drain one. Commonly known method would be the classical incision and drainage; the open way. The more recent method; percutaneous drainage comes with the rise of a new kid on the block, interventional radiologist.

### REPORT:

Theoretically, if there is a way out, an abscess could be treated. We followed a case of a 66years old male who was quadriplegic due to a massive stroke. He was referred to our centre initially for an infected sacral sore. Following a complaint of abdominal pain, a CECT abdomen was done which reveals a large subcutaneous and intramuscular collection up to the chest level. The patient and family members however was not keen for an invasive surgical intervention in view of multiple comorbidity and already poor quality of life from being bed bounded.

He was treated with an empirical intravenous antibiotic and regular dressing of the pressure sore. The ulcer was noted to drain seropurulent discharge, more upon milking the entire length of paraspinal muscles; proving a communication. Subsequent attempt for percutaneous drainage of the collection was abandoned for small window. Makeshift drain in form of ryles tube was inserted via the sinus from the ulcer. Daily irrigation with antiseptic solution through ryles tube and manual drainage by percussion and milking was done. Patient got out of sepsis, and sacral ulcer improved. Repeated CT scan done 1 month later showed significant reduction of collection. Patient was subsequently discharged well.



**Figure 1: CECT abdomen. Large subcutaneous and intramuscular collection.**



**Figure 2: Sacral sore with seropurulent discharge**



**Figure 3: Sacral sore. Daily manual drainage**

### CONCLUSION:

Surgical drainage is not the only solution in treating an abscess. Flushing and tactile manoeuvres may be considered as alternative way for collection drainage.

### REFERENCES:

McNamara WF, Hartin CW Jr, Escobar MA, Yamout SZ, Lau ST, Lee YH. An alternative to open incision and drainage for community-acquired soft tissue abscesses in children. *J Pediatr Surg.* 2011 Mar;46(3):502-6. doi: 10.1016/j.jpedsurg.2010.08.019. PMID: 21376200.