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Primary fistulotomy and surgical drainage abscess is associated with low fistula recurrence rate

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Background: Most of the anorectal abscess has a cryptoglandular origin different forms of treatment as antibiotics, needle aspiration or drainage with local anesthesia are associated with high rate of recurrence and development of fistula. There are few literatures regarding the one stage management performing drainage with identification of primary hole and fistulotomy.

Aim: To analyze a retrospective series of 90 cases of anorectal abscess in terms of surgical outcomes with focus in recurrence and development of fistula tract.

Material and Methods: During the period June 2011 to April 2015 a total 90 patients were included, they had an average age of 39 years old (range 19-73), according with the location were 49% isquiorectal , posterior 29%, anterior 19% and horseshoe 3%, with predominance of male n=67 (77%), patients were treated in several private tertiary care hospital HMG Coyoacan predominantly (48.1), time operative, bleeding, time of healing, recurrence, age and sex was analyzed.

Results: The mean age was 39 years old (range 19-73) with a predominance of male sex (77%), mean of surgical bleeding was 15ml, hospital stay of 1 day (100%), operative time 19.8minutes (range 15-20), time of recovery was 14 days and time of healing 20 days, recurrence 2.5% (2 patients), requiring a new fistulotomy , the pain was controlled with paracetamol 750 mg three times a day alternating with ketorolac 10 mg three times a day orally and antibiotic amoxicilin-clavulanic acid 875 md twice/day during 10 days.

Conclusions: This study shows that performing both procedures drainage and fistulotomy the incidence of fistula is very low, therefore we recommend in abscess with cryptoglandular origin; this approach which potentially decrease another surgery in the future.

Biography

Quintin H González was Graduated MD by the Autonomous University of the State of Mexico (UAEM) and got his best average distinguished with the prize Up John to the academic excellence and the medal Ignacio Ramirez. He did his post-graduation in General Surgery in the National Institute of Nutrition Salvador Zubirán, distinguished as chief residents. He is a Sub specialist in Colorectal and advanced laparoscopic surgery in The University of Alabama At Birmingham, USA, distinguished as outstanding international school, certified by the Mexican boards in General Surgery, gastrointestinal surgery and the Mexican Board of specialists in diseases of the colon, rectum and anus. He is the past president of Mexican collage of coloproctology, distinguished as Doctor Honoris Causa in health at Perú in 2013. He is a member of Mexican Academy of surgery and national Academy Medicine and American Society of colon and rectal surgery, author of 70 articles published in indexed journals more than 300 conferences by invitations, 43 abstracts and 36 posters.

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