

4th International Conference on

RHINOLOGY AND OTOTOLOGY

October 18-19, 2017 Dubai, UAE

The use of Interventional Radiology Percutaneous Drainage (IRPD) as a minimally invasive technique in management of deep neck abscess

Al Azawi Ahmed, Al Koteesh Jamal, Al Nakshabandi Abdulla and Nibelle Isabelle
Sheikh Khalifa General Hospital, UAE

For centuries, the diagnosis and treatment of deep neck abscesses have challenged physicians and surgeons. The complexity and the deep location of this region make diagnosis and treatment of infections in this area difficult. These infections remain an important health problem with significant risks of morbidity and mortality. Drainage is the cornerstone of therapy for the treatment of deep neck space abscesses after ensuring a secure airway before initiating any procedure. Between October 2010 and March 2013, 19 patients presented to the emergency department at Al-Ain Hospital with different varieties of deep neck abscesses. All of them underwent imaging test (either CT scan or ultrasound) to confirm the diagnosis and localization of the abscess. The decision for percutaneous drainage was based on a consensus between both ENT surgical and radiology teams. All patients were admitted to the hospital and received IV broad-spectrum antibiotics covering both aerobic and anaerobic bacteria. In an interventional radiology suite, ultrasound guided aspiration and catheter drainage of neck abscess was done under local anesthesia by insertion of a thin (6-8 Fr) trocar-type pigtail drainage catheter in the abscess cavity. The catheter was kept in place with frequent saline irrigation until drainage stopped. In 17 (89.5%) patients, the abscess was successfully drained and completely cured. In 2 (10.5%) cases the collection was still present after IRPD due to deep multiloculated abscess and required surgical drainage in the operative theater under general anesthesia. By minimizing the physical trauma to the patient, IRPD can reduce recovery time as well as shorten hospital stay. IRPD seems to be a fast, safe and highly effective low-cost minimally invasive method for treatment of deep neck abscesses. Neck abscesses that cannot be treated or not resolved with IRPD require surgical drainage in the operating room.

Biography

Al Azawi Ahmed is a Consultant Otolaryngologist with 20 years' wide experience in the field of Otolaryngology Head and Neck Surgery, including 11 years' experience in UAE from which almost 7 years he has worked in SEHA governmental hospitals. Presently, he has been working in Sheikh Khalifa General Hospital as a Consultant Otolaryngologist. He is involved in academic teaching as an Adjunct Assistant Professor as well as in scientific research. He is triple-board certified and a Fellow of the American College of Surgeons and a Fellow of the European Board and the Arab Board in Otolaryngology-Head & Neck Surgery.

dramfent@gmail.com

Notes: