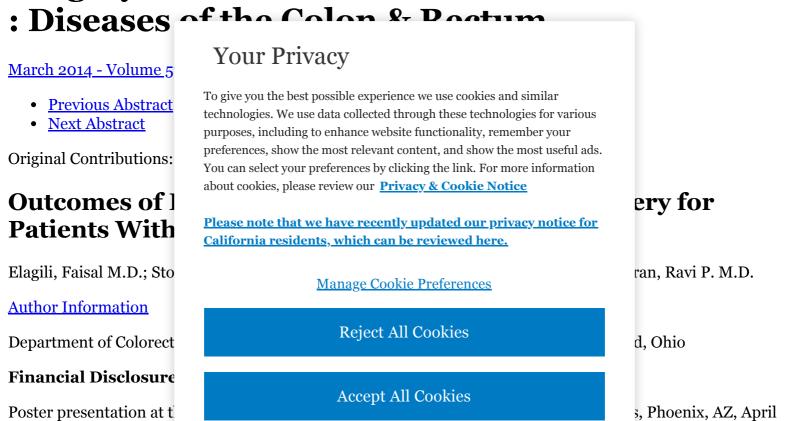
Outcomes of Percutaneous Drainage Without Surgery for Patients With Diverticular Abscess



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Metrics

Abstract

BACKGROUND:

Data on percutaneous drainage followed by observation for diverticular abscess is scant.

OBJECTIVE:

The aim of this study is to assess outcomes of percutaneous drainage alone in the management of peridiverticular abscess.

DESIGN:

This is a retrospective study from a prospectively collected database.

SETTING:

This study was conducted in a high-volume, specialized colorectal surgery unit.

PATIENTS:

All patients with a diverticular abscess of at least 3 cm in diameter, treated between 2001 and 2012, who had prohibitive comorbidities or refused surgery after percutaneous drainage were included.

MAIN OUTCOME MEASURES:

The primary outcome measured was the treatment of diverticular abscess with percutaneous drainage alone.

RESULTS:

A total of 18 patients (11 diverticulitis, or for a m location was pelvic in 8 with the exception of 2 placement. Three patier drainage. Seven of the s underwent surgery betv cases of recurrence, one uncomplicated divertical term failure of percutan diverticulitis (p = 0.9).

LIMITATIONS:

This study was limited l size.

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gery for recurrent -10) cm, and the was 20 ± 1.3 days, al difficulty in drain r percutaneous these patients Of the remaining 4 13 patients had ns between longus episodes of

l its small sample

CONCLUSIONS:

Percutaneous drainage alone was successful in avoiding surgery in the majority of this selected patient population with sigmoid diverticular abscess. Future studies should assess the appropriate indications for a more liberal use of percutaneous drainage not followed by elective surgery.

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