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Is cavity packing following cutaneous abscess drainage necessary? A systematic review and metaanalysis

Janindu Goonawardena*

General Surgery, Eastern Health, Australia

About the Study

Background: This meta-analysis aims to analyze the difference in outcome between a packed group (PG) and a non-packed group (NPG) of patients post drainage of simple cutaneous abscesses. Methods: A systematic review of patients who underwent incision and drainage of simple cutaneous abscesses with packing or no packing was performed. The meta-analysis was performed using Mantel–Haeszel method. Results: 217 patients from four studies were included. Overall no significant difference was observed in the primary outcome of recurrence of abscess post

drainage in the PG compared to the NPG (RR 2.34, 95% CI 0.90, 6.10) with no heterogeneity between studies (I2 =0%, P=0.08). Subgroup analysis involving three studies showed no significant difference in abscess recurrence risk between the PG and the NPG in the pediatric population (RR [95% CI]:2.23[0.77,6.47]). Quality assessment demonstrated all three RCTs were low-quality with an overall high-risk of bias. Conclusion: Based on the limited number of low-quality small studies, there is data to support elimination of routine cavity packing post drainage in immunocompetent pediatric patients. There is a clear paucity of evidence in the adult population regarding utility of continuous packing.

Biography:

Janindu Goonawardena works in General Surgery, Eastern Health, Australia