

Irrigation of cutaneous abscesses may not be necessary

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A procedure commonly performed in emergency departments on cutaneous abscesses may not have any impact on the need for further interventions and therefore may not be necessary, according to a study published online Friday in *Annals of Emergency Medicine*.

"Despite the lack of evidence supporting its use, irrigation of cutaneous abscesses has routinely been part of [incision](#) and drainage (I&D) treatment for these wounds," said lead study author Brian Chinnock, MD, of University of California San Francisco-Fresno [emergency medicine](#) program "There was no difference in the need for future intervention between patients who had irrigation and patients who did not have it as part of I&D."

Of patients who received irrigation as part of I&D treatment for cutaneous abscesses, 15 percent required further intervention. Of those who did not receive irrigation, 13 percent required further intervention. There was no difference in pain scores between the two groups. More than a million patients a year have I&D for cutaneous abscesses in U.S. emergency departments.

"Potential disadvantages of irrigation include increased treatment time, increased costs and increased risk of microbiologic contamination of the surrounding area," said Dr. Chinnock. "Based on this study, irrigation should not be considered a standard part of incision and drainage of cutaneous abscesses."

More information: "[Irrigation of Cutaneous Abscesses Does Not Improve Treatment Success](#)"

Provided by American College of Emergency Physicians

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