Persistent Pediatric Breast Abscesses Following Initial Treatment at Tertiary and Community Centers

Derek Marlor  
*Children's Mercy Kansas City*

Kayla B. Briggs  
*Children's Mercy Hospital*

Shai Stewart MD  
*Children's Mercy Hospital*

Nelimar Cruz-Centeno  
*Children's Mercy Kansas City*

Charlene Dekonenko  
*Children's Mercy Kansas City*

*See next page for additional authors*

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Creators
Derek Marlor, Kayla B. Briggs, Shai Stewart MD, Nelimar Cruz-Centeno, Charlene Dekonenko, Tolulope A. Oyetunji, and Jason D. Fraser
Persistent Pediatric Breast Abscesses Following Initial Treatment at Tertiary and Community Centers

Derek R. Marlor MD, Kayla B. Briggs MD, Shai Stewart MD, Nelimar Cruz-Centeno MD, Charlene Dekonenko MD, Tolulope A. Oyetunji MD, Jason D. Fraser MD, FACS, FAAP
We Have No Disclosures
Introduction

• Little data exists on the management of pediatric breast abscesses that fail initial treatment

Characterization of Pediatric Breast Abscesses and Optimal Treatment: A Retrospective Analysis

Charlene Dekonenko, Neal Shah, Wendy Jo Svetanoff, Obiyo O Osuchukwu, Justin A Sobrino, Tolulope A Oyetunji, Jason D Fraser

• Hypotheses: We hypothesize pediatric breast abscesses can be effectively managed with antibiotics for initial and persistent disease
Methods

• Retrospective review, single center
• 2008-2018
• Patients were divided
  • Group 1: initial treatment at our institution
  • Group 2: initial treatment at referring centers
Results

- 145 total patients identified
- 85% (n=49) success with antibiotic treatment
- 12.6% (n=14) had persistent disease and required further treatment
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• 50% (n=17) were treated with antibiotics
  • 8 received 1\textsuperscript{st} antibiotic
    • 2 had persistent disease
  • 9 had change in antibiotic
    • 1 had persistent disease
• 11.8% (n=4) received 3\textsuperscript{rd} treatment
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Conclusion

• Recurrence rates of 12.6% vs. 11.8%
• Antibiotics may be used as treatment for persistent breast abscess in appropriate cases
• Damage to the developing breast bud should be minimized
• Interventions should be performed by experienced practitioners