



ABCESUL SPAȚIULUI DOUGLAS: OPȚIUNI DE DIAGNOSTIC ȘI TRATAMENT

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Introduction

Douglas abscess is a life-threatening collection of infected fluid. Usually it occurs as a complication after operative proceduresorcan also present as a result of the complexity of certain medical conditions like as pelvic inflammatory disease, appendicitis, diverticulitis, inflammatory bowel disease, etc..

Keywords

Douglas pouch, infection, abscess, diagnosis, management

Purpose

The current abstract aims to explain the pathophysiology of **Douglas abscess, elaborates on the importance of imaging** techniques in diagnosing , and illustrates the necessary information that leads to identifying high-risk patients requiring immediate surgical intervention.





CONFERINȚA ȘTIINȚIFICĂ ANUALĂ cercetarea în biomedicină și sănătate: calitate, excelență și performanță



Research of the specialty literature and highlighting about the mechanisms of formation, clinical manifestations characteristic, methods of diagnosis and management of the Douglas abscess, published in the last 10 years in the databases **MEDLINE, PubMed, EMBASE.**

Results

A systematic literature review was performed, according to the from PubMed and Google Scholar using the mesh terms: "Douglas pouch", "abscess", "management". Patients with Douglas abscess present with high-grade fever, leukocytosis, palpable pelvic mass, vaginal bleeding or discharge, and lower abdominal pain often associated with elevated C-reactive protein. Its presentation requires early recognition, immediate hospitalization, and surgical treatment.





Conclusions The outcome of the patients with a Douglas abscess depends on the extent of the disease, prompt diagnosis, and response to the initial medical treatment. The rupture of this abscess is a life-threatening emergency and requires immediate surgery. Early recognition and expeditious treatment with appropriate antibiotics and surgical interventional can lead to successful treatment.



Material and methods



Aspect intraoperator

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