

Abstract

Background : Perianal abscess is considered a benign anorectal disease that is treated as the gold standard by incision and draining infected soft tissue. However, about 50 % of patients with perianal abscess subsequently develop fistula after I&D abscess. Limited studies have been performed to determine risk factors that have conflicting.

Aim: This study investigates the factors involved in the incidence of anal fistula following incision and drainage of superficial perianal abscess.

Materials & Methods: The present study is a cross-sectional study. The statistical population includes 75 people who underwent I&D, 36 of whom received antibiotics and 39 who did not receive antibiotics. . Basic information was extracted from patients' clinical records and patients were evaluated for fistula development after at least 3 months. Finally, the results were analyzed using appropriate tests in SPSS software.

Results :Out of 75 patients included in the study, 20 were female (26.7%) and 55 were male (73.3%). The mean age was 42.95 ± 15.092 . This study showed that there was a significant difference between the group receiving antibiotics and the group without receiving antibiotics in terms of fistula formation. The fistula rate in the group receiving antibiotics was lower than the control group ($P = 0.007$). Also, this study showed that there was no significant relationship between age, sex and smoking with fistula development.

Conclusion :The results showed that prophylactic antibiotic therapy after incision and drainage of perianal abscess significantly reduced the incidence of postoperative fistula.

Keywords : superficial perianal abscess , incision & drainage , fistula