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Secondary infection of the umbilical keloid: Report of three cases and literature review

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As many surgical operations have been replaced by laparoscopic surgery, the number of umbilical keloid patients is gradually increasing. Generally, as keloids are painful in the disease itself, clinical differentiation with secondary infection could be difficult. If a thick keloid is formed, it may be a hard problem to confirm the fluctuation and heat sensation in the physical examination. For these reasons, rapid and appropriate surgical intervention can be delayed in numerous umbilical keloid patients. We experienced three cases of secondary keloid infection in our hospital. In two middle-aged women with tenderness of the keloid, an inflammatory epidermoid cyst was identified by incisional biopsy. Pus from the both patients was sent for microbiological examination, but any significant bacteria growth that might be a pathogenicity factor was not found. Both patients were treated by empirical antibiotics and pus drainage with sterile packing dressing. In the other patient, the cause of repeated keloid inflammation was found to be an iatrogenic small peritoneal defect due to previous surgery. She was sent to general surgery part for additional diagnostic work-up and proper management. From these, we could infer the inflammation of umbilical keloid can be caused by a lot of reasons and require much attention for diagnosis. Thus, we will discuss appropriate diagnostic and therapeutic approach for secondary infection of umbilical keloid.

Biography

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