



Perianal abscesses in specific conditions

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Dear Editor,

We read with great interest the report entitled ‘*Perianal abscess in children: an evaluation of microbiological etiology and the effectiveness of antibiotics*’ [1]. We would like to congratulate the authors for this valuable contribution and highlight a few issues.

Perianal abscess (PA) is a commonly encountered problem in daily practice of both pediatricians and pediatric surgeons. As the authors mentioned, the antimicrobial therapy is mostly needed besides the local anti-inflammatory treatments. Further management strategies may be needed in some specific clinical conditions such as immune deficiency and inflammatory bowel diseases (IBD) [2]. However, specific cases including immune deficient ones, which are the most difficult to treat, were excluded from the study. As a pediatric surgeon, it would be beneficial to learn from the authors in which cases who presented with PA and have not yet been diagnosed as immune deficient, immunodeficiency should be suspected. Could isolated pathogens be a clue to suspect immunodeficiency?

Secondly, the granulomatous diseases and IBD may be presented with PA which were encountered recurrent pattern [3, 4]. Although the authors excluded the immune deficient cases, 17% of cases had relapse for perianal abscess. This relapse rate may be due to the presence of another underlying pathology such as IBD in those cases. Besides recurrent pattern, in what cases should IBD be suspected in patients presenting with PA? Could isolated pathogens be a clue to suspect IBD?

Lastly, it would be beneficial giving detail about the comparison of relapsing and non-relapsing cases regarding the

demographic and clinical features, management strategies and antimicrobial therapy. Since recurrences make the management more challenging in those cases, the suggestion of management strategies in relapsing cases would help clinicians in daily practice.

We again congratulate the authors for this valuable study and believe that it will guide many clinicians in the management of childhood PA.

Author contributions BG: wrote the main manuscript text. OB: made supervision and critical review. All authors reviewed and approved the manuscript.

Declarations

Conflict of interest The authors declare that they have no conflict of interest.

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