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Breast abscess during postpartum period: A big problem (Case Report)

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Abstract

A case study is a research method to gain a better understanding of a subject or process. Case studies involve in-depth research into a given subject, in order to understand it's functionality and successes. Lactational breast abscess is an accumulation of pus in an area of the breast and frequently develops as a result of inadequately treated infectious mastitis. Between 5% and 11% of lactating women with infectious mastitis will develop a breast abscess, which usually occurs at 3 to 8 weeks postpartum. The causative agent is typically Staphylococcus aureus which enters the breast tissue through a milk duct or crack in the nipple. I have studied a case in community setting. She was 28 years old, 6 months lactating mother. She had developed breast abscess at 6 months postpartum for that she took treatment and abscess drainage was done. This whole process of breast infection, treatment and recovery took one month duration.

Keywords: case study, lactation, breast abscess, postpartum

Introduction

The benefits of breastfeeding are well known, and the World Health Organization recommends exclusive breastfeeding for the first six months of life and continuing breastfeeding to age two. However, many women stop breastfeeding due to lactational breast abscess formation. A breast abscess is a localized accumulation of infected fluid in breast tissue. Abscesses are commonly treated with antibiotics, incision and drainage (I&D) or ultrasound-guided needle aspiration, but there is no consensus on the optimal treatment.

Breastfeeding isn't always super comfortable, especially in the first few weeks, but you've probably been told that it shouldn't be downright painful—and it should never make you feel physically ill, either. Very commonly, a breast abscess is preceded by mastitis, says Henning, though it can also result from a plugged duct that goes untreated. Either way, failing to fully empty your breasts during nursing sessions can lead to the clogged ducts that may ultimately cause infection.

Puerperal mastitis is reported to occur in 2% to 24% of breastfeeding women from several weeks to up to 1 year after delivery in women who continue to breastfeed. In a prospective study of 350 breastfeeding women, 83 (23.7%) developed mastitis symptoms within 1 year of delivery. Of women with mastitis symptoms, 41% presented within the first month. Puerperal mastitis is reported to occur in 2% to 24% of breastfeeding women from several weeks to up to 1 year after delivery in women who continue to breastfeed. In a prospective study of 350 breastfeeding women, 83 (23.7%) developed mastitis symptoms within 1 year of delivery. Of women with mastitis symptoms, 41% presented within the first month.

Here I report a case of lactational breast abscess of a 6 months lactating mother who has undergone various stages of diagnosis and treatment for the condition.

Material and Methods

In 2019 One 26 years lactating female from nearby community approached me. She was one and half months postpartum. She had developed a breast abscess. Before 15 days she was alright, suddenly one small node like structure felt by her on right breast with pain. He had taken home measures like hot compression, breast massage, breast milk expression because breast milk production was more and baby was unable to empty the whole breasts. She was feeding her baby every 2nd hourly.

Even that also node was increasing in size with severe pain and fever 103 F. on 3rd day she

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(Assistant professor), Devbhoomi Institute of nursing, Dehradun, Uttarakhand, India went to a local doctor and homeopathic clinic. Treatment was given to her for pain, fever and infection. Fever and pain were reducing for 3-4 hours and gain resuming at its severe form.

On 5th day she went to a nearby hospital. There Gynecologist examined her and investigations were done. In culture and sensitivity test, staphylococcus was separated from culture and penicillin, ciprofloxacin and cotrimoxazole drugs were found resistant to bacteria.

Though after taking treatment and home remedy condition was not improved. It was converted to abscess now and wound filled with little pus on 7th day. It was now of a big size, more uncomfortable for the mother but she continued her breastfeeding from both breasts as instructed by Gynecologist, because breast should be empty to decrease her uneasiness and to feed baby properly. Daily dressing was done at home after cleaning the wound.

On 12th day wound was fully filled with pus appearing yellow in colour and woman was feeling itching with cramps, as on 15th day we drained her wound our self with warm water and cotton. After cleaning the wound a cavity was formed on breast because of loss of breast tissues. Dressing was done with betadine and wound was closed and woman was sent to hospital for further management.

At hospital again wound was cleaned and wound dressing was done and she was called daily for dressing. After 3 days of wound dressing at hospital wound was now improved. Tissue layer was formed and was less painful. After that she continued her wound dressing at home for one week. The wound was improved more with well formed boundaries after 10 days. Healing process of wound was little slower than surgical wound. It took one month to completely heal. Scar mark was formed and still present on the site. Breastfeeding continued without any problem to mother and baby and milk production is good.

Result and Discussion

Breast abscess is a big health issue among lactating mothers which makes them more uncomfortable and unable to breastfeed their babies. Due to this reason many women start practicing formula feed for their babies and babies become deprived of breast milk. As breast milk is very essential for babies for their proper growth and development. It provides total nourishment to infants for six months. After that it should be continued with normal diet for two years but certain health problems of mothers as well as babies show adverse effects on breastfeeding. Breast abscess is one of them that incapacitates mother to feed her baby.

As for the condition many causes, solutions and preventive measures are given. Even following those many breast problems are still prevalent in the society. Breast abscess is a condition which can develop at any stage of childbearing age. During lactational period it is common among mothers. Most of the time it is developed due to overproduction of milk, stagnation of milk inside the milk ducts and less suckling by the baby. It may occur due to enter of the bacteria through external or internal port.

Here we have discussed a case of breast abscess which was developed 6 weeks after delivery. In starting woman felt pain and lump in the breast which was increasing in size with high grade fever. She took treatment both allopathic and homeopathic. It converted to breast abscess and appeared yellow in colour. It was drained at home and

dressing done after that she was sent to hospital for further management. She took one for recovering from the condition and scar mark was present.

This case the cause behind the condition was stagnation of breast milk and presence of bacteria as it is found in the test but lack of post natal care and delay in recognition of problem may be the prior reason for development of such big issue.

Conclusion

The majority of isolated cases of breast abscess have good outcomes but in women with recurrent infections, it can lead to pain, scarring and a poor quality of life. Most patients have recovery within 2-3 weeks following mastitis. Any patient that continues to have features of mastitis after 5 weeks should be evaluated for malignancy or infection.

My case was 26 years old female. She was in 6 weeks postpartum period. She developed breast mass with pain and fever later it was converted to breast abscess. Both allopathic and Ayurvedic treatment was taken by woman but the condition went worst. Abscess was then drained at home and she was sent to hospital for further management. Wound dressing was done at hospital for 3 days and then it was managed at home. She took one month time to recover fully. Scar mark formed after wound healing. Breastfeeding and milk production was not affected by wound. Lady is now healthy and comfortable.

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