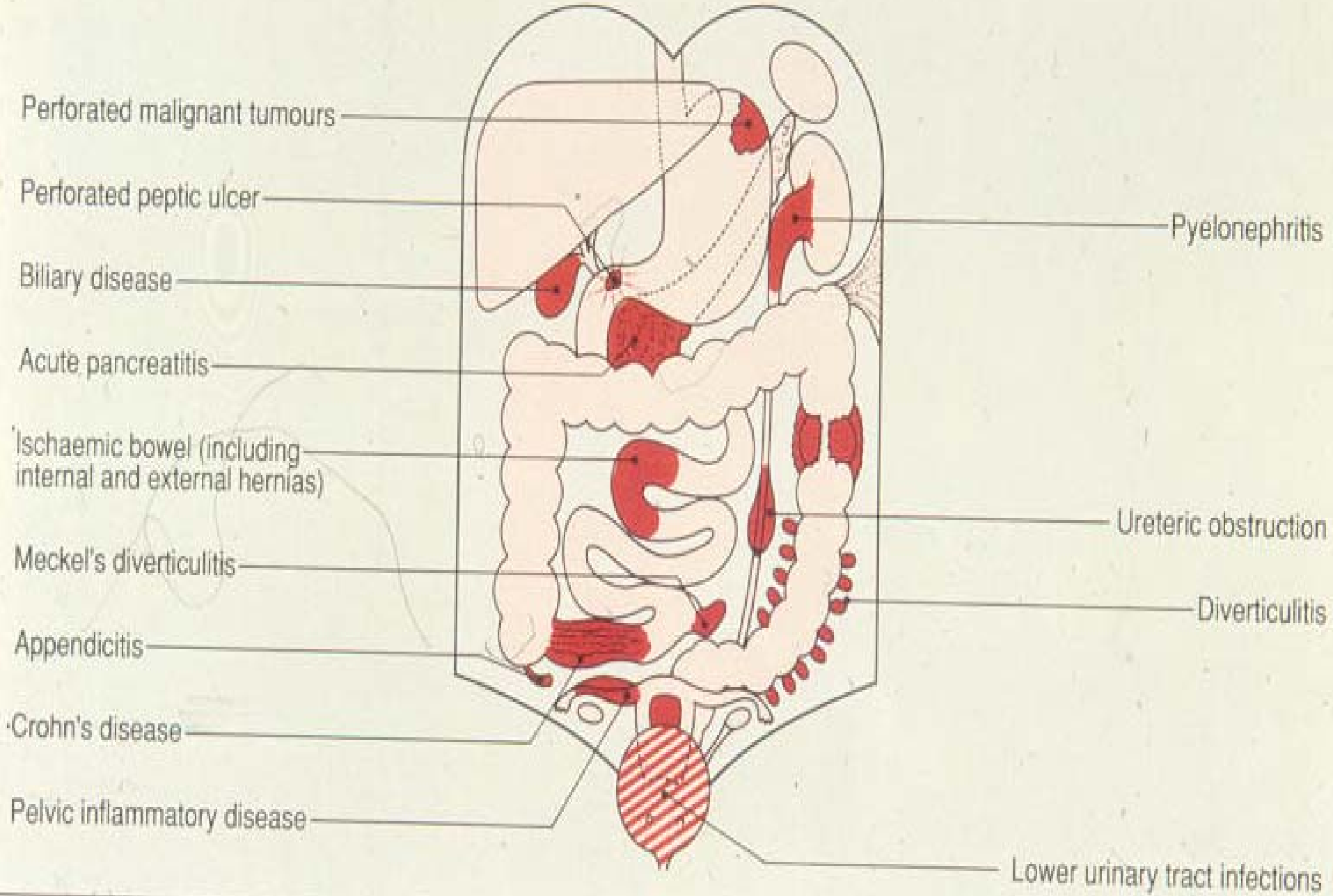
# Peritonitis

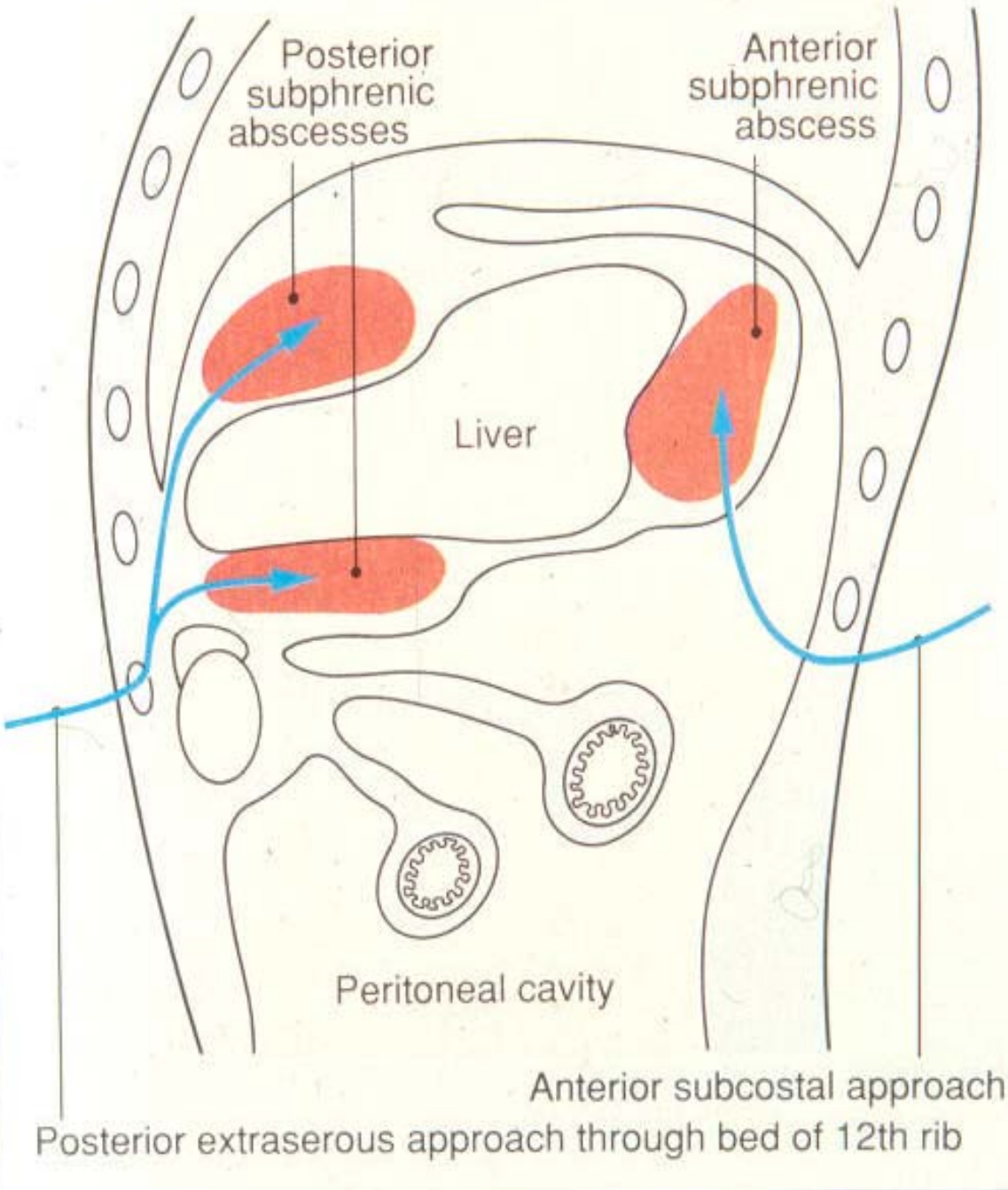
# Classification of peritonitis

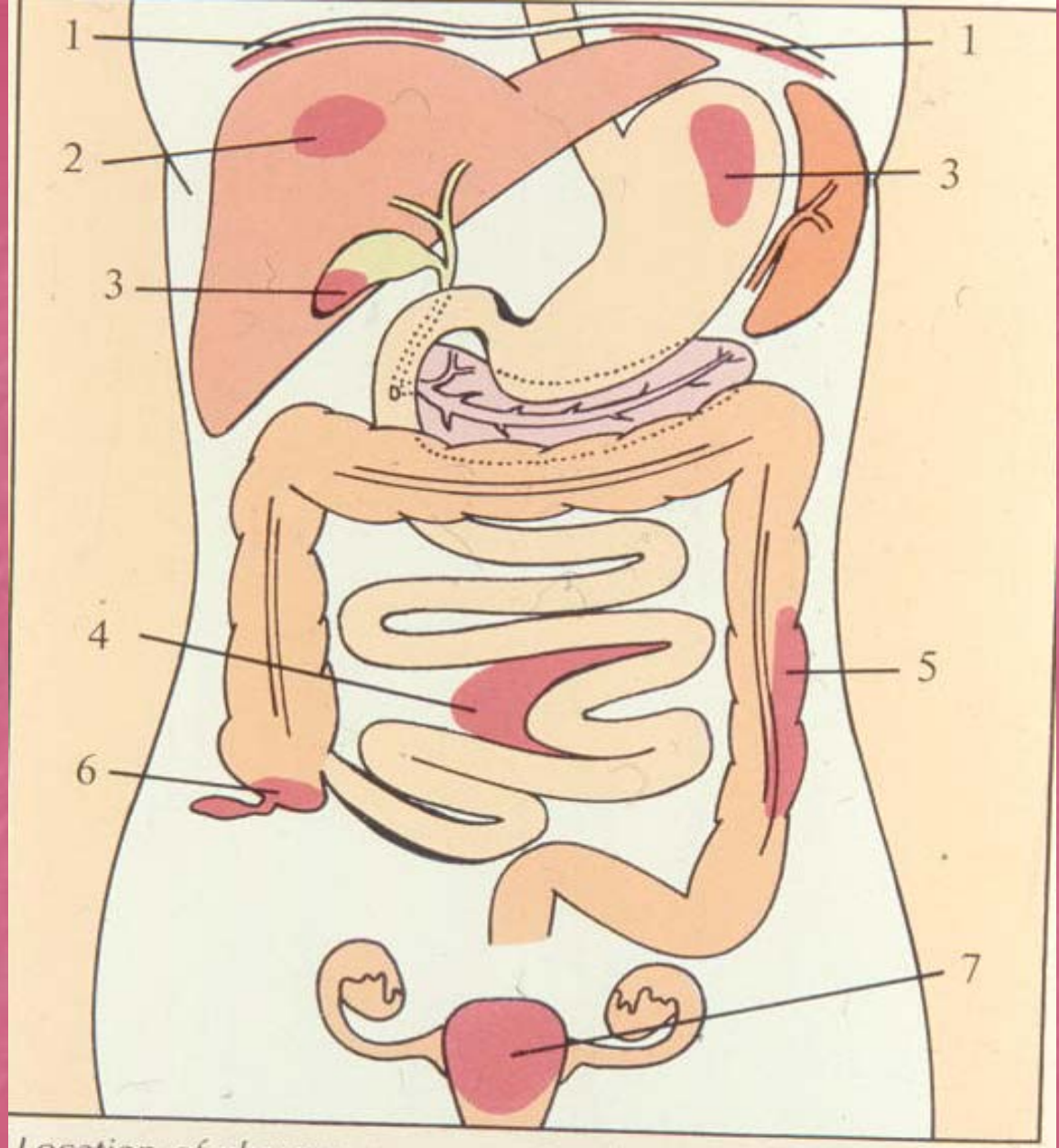
| | |
|---|---|
| **I** | **Primary peritonitis** |
| A | Spontaneous peritonitis of childhood |
| B | Spontaneous peritonitis of adults |
| C | Peritonitis in patient's on continuous ambulatory peritoneal dialysis |
| D | Tuberculous peritonitis |
| **II** | **Secondary peritonitis (acute suppurative)** |
| A | Perforation peritonitis (spontaneous acute) |
| 1 | Gastrointestinal tract perforation |
| 2 | Bowel wall necrosis |
| 3 | Pelviperitonitis |
| 4 | Peritonitis after translocation of bacteria |
| B | Postoperative peritonitis |
| 1 | Leak of an anastomosis |
| 2 | Leak of a suture line |
| 3 | Stump insufficiency |
| 4 | Other iatrogenic leaks |
| C | Post-traumatic peritonitis |
| 1 | Peritonitis after blunt abdominal trauma |
| 2 | Peritonitis after penetrating abdominal trauma |
| **III** | **Tertiary peritonitis** |
| A | Peritonitis without pathogen |
| B | Peritonitis with fungi |
| C | Peritonitis with low-grade pathogenic bacteria |
| **IV** | **Intra-abdominal abscess** |
| | With primary peritonitis |
| | With secondary peritonitis |
| | With tertiary peritonitis |

## Intra-abdominal diseases causing abscess formation

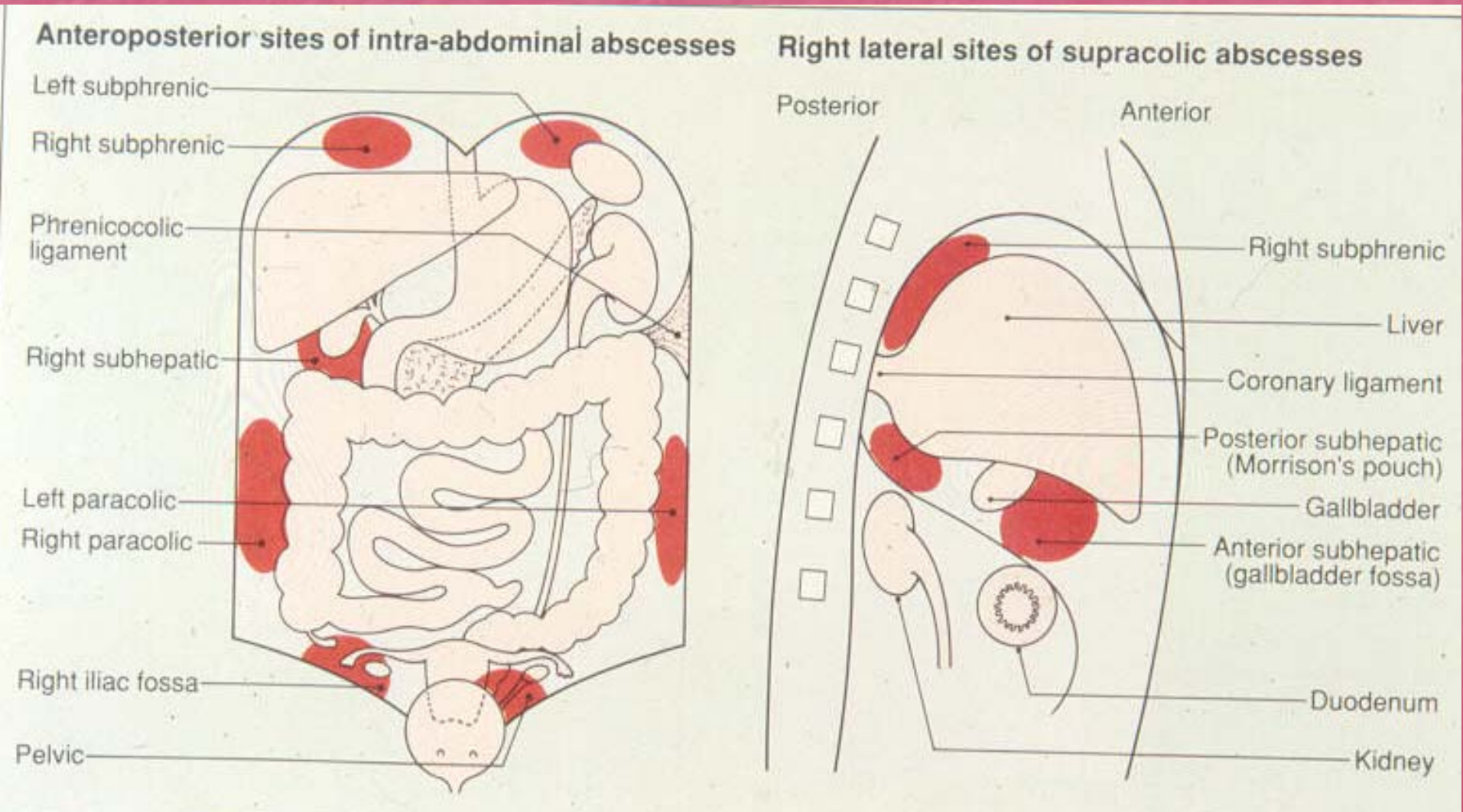


## Routes for drainage of subphrenic abscess

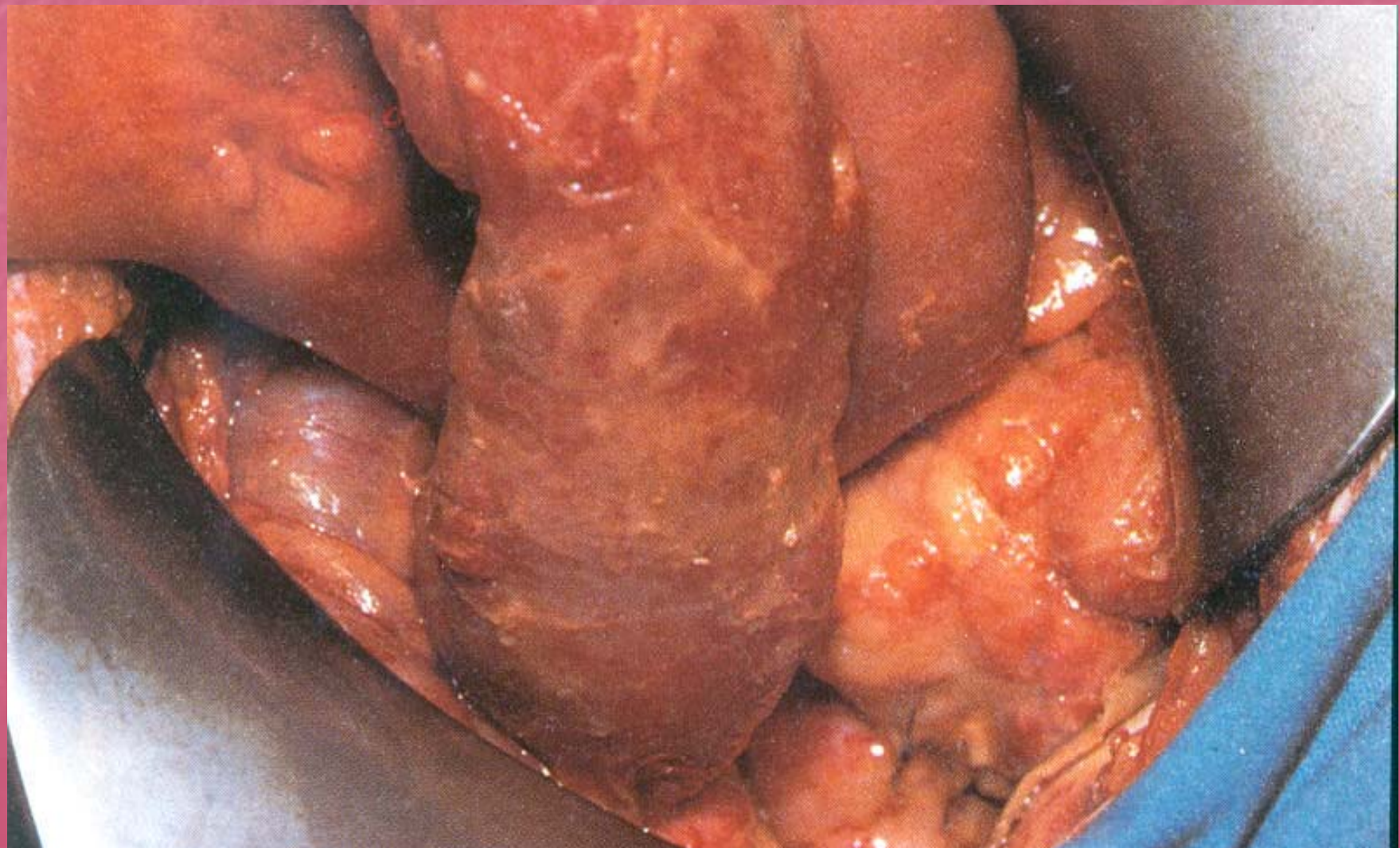


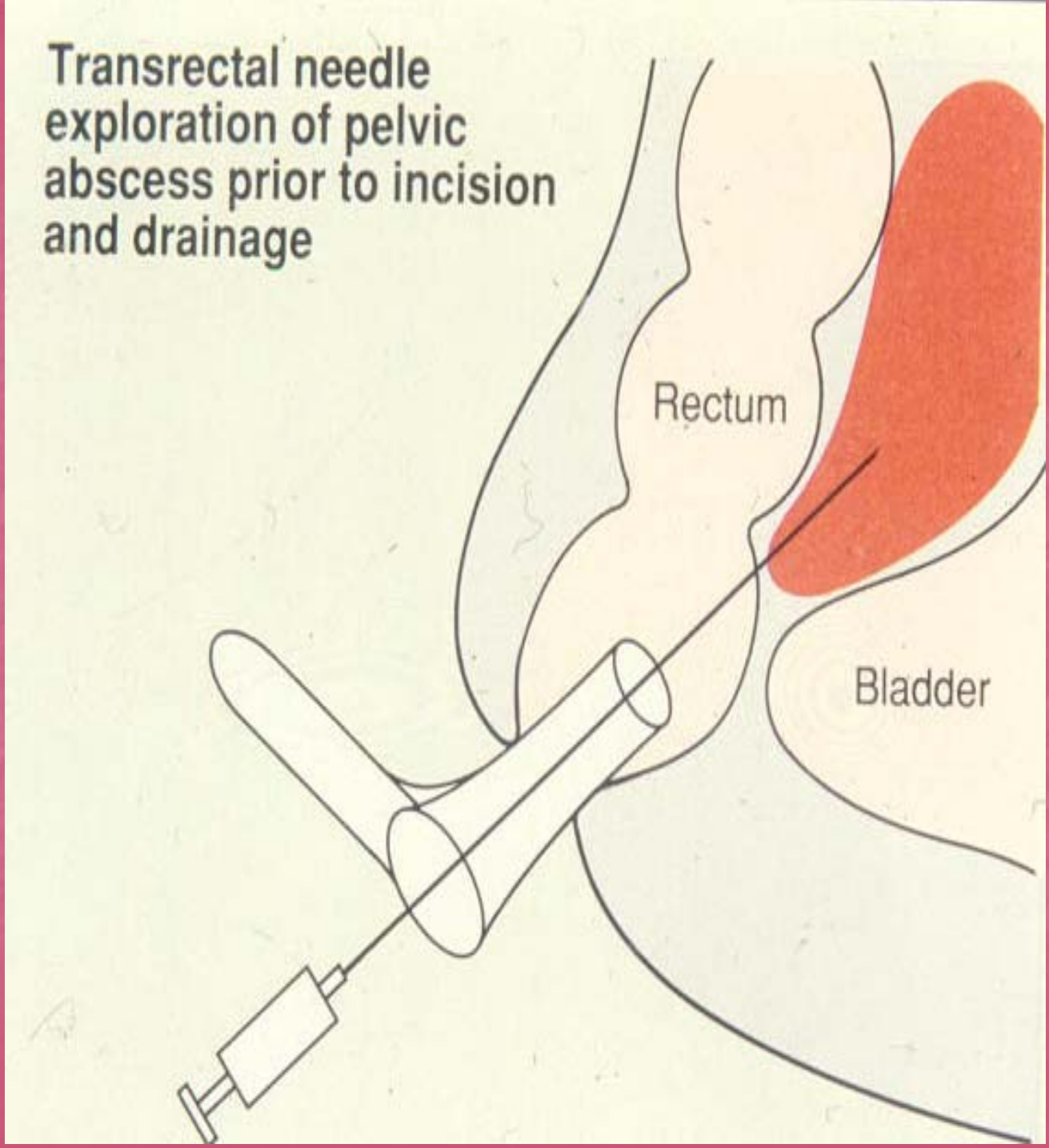



Location of abscesses
1 = Subphrenic
2 = Hepatic
3 = Subhepatic
4 = Interenteric
5 = Paracolic
6 = Pericecal
7 = Douglas


Anteroposterior sites of intra-abdominal abscesses
Left subphrenic
Right subphrenic
Phrenicocolic ligament
Right subhepatic
Left paracolic
Right paracolic
Right iliac fossa
Pelvic
Right lateral sites of supracolic abscesses
Posterior
Anterior
Right subphrenic
Liver
Coronary ligament
Posterior subhepatic (Morrison's pouch)
Gallbladder
Anterior subhepatic (gallbladder fossa)
Duodenum
Kidney

# Purulent fibrin deposition on the bowel surface




Transrectal needle exploration of pelvic abscess prior to incision and drainage
Rectum
Bladder

# Basic steps of therapy

- Eliminate source of contamination
- Reduce bacterial inoculum
- Prevent recurrent or persistent sepsis

# Basic steps of therapy

- Surgical therapy:
  - One stage operation
  - Hartmann's procedure
  - Programmed lavage
  - Drainage
- Broad spectrum antibiotic therapy
- Intensive supportive therapy

- Mortality: