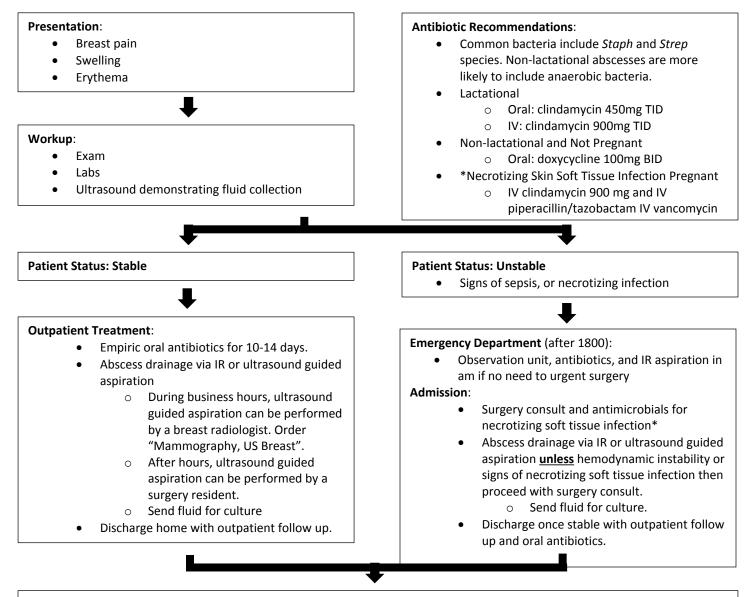
## **Breast Abscess Management Guideline**



## **Recommended Follow-Up:**

- Follow up in 7-10 days for reassessment with Breast Health or PCP
- If persistent symptoms, check culture results, adjust antibiotics if needed, and repeat aspiration. If persistent abscess after 3+ aspirations, consider incision and drainage.
- Smoking cessation risk factor for recurrent and bilateral abscesses
- Mammogram recommended for all patients over 35, once abscess has completely resolved

## Red Flag Symptoms:

- Chronic course
- Lack of response to antibiotic treatment (maximum of 2 rounds)

Note: Inflammatory breast cancer should be considered in these patients and they should be referred for mammography and biopsy.

## Lactational Abscesses and Breastfeeding:

• Continued breastfeeding is encouraged unless contraindicated due to need for antibiotics that are dangerous to newborns, i.e., doxycycline is contraindicated

