Ulcer :Is an open circumscribed lesion located on a free surface ,which fails to undergo natural healing process.

Classification of external ulcers.

1-Specific infective ulcer.

2-Neoplastic ulcer.

3-Trophic ulcer.

Signs .

An ulcer is described as a circular to oval shape lesion with undermined edge ,punched out ,heaped up or rolled flat edges covered with growing epithelium are evidence that destruction has ceased and healing is going on .purulent discharge if present either abundant or scanty indicate pyogenic infection.

Treatment of ulcer depends on the cause :

1-Surgical excision .

2-Use of ultraviolet light in some cases.

Abscess: Is a localized infection caused by pyogenic microorganism(staphylococcus ,streptococcus,corynibacterium tuberculosis, pseudomonas etc.)

Or abscess could be defined as pus enclosed in a cavity surrounded by pyogenic membrane .

Pathogenesis:

Abscess starts with localized infection of tissue by pyogenic microorganism leads to inflammation , these bacteria starts to destroy tissue leading to exudation and necrosis of the affected tissue ,body's defense mechanism surround the infected area by a zone through accumulation of leukocytes ,macrophages, lymphocytes and formation of granulation tissue around infected tissue (pyogenic membrane).

Classification of abscess

1. According to site

1-Superficial abscess ---located on body surface.

2-deep abscess - located in internal organ or cavity.

1. According to evolution

1-Acute abscess : occurs within 3-5 days after infection, all symptoms of acute inflammation (pain, hot….etc.) (hot abscess).

2-Chronic abscess: takes longer period to occur hard, non-painful,( cold abscess).

1. According to causative agent

1-primary Abscess: caused by direct local infection.

2-Secondary abscess: due to systemic infection as in strangles, glanders.

Infection ,tuberculosis..

Symptoms

\*Acute – is hot – red – painful – loss of function – swelling is soft consistency – fluctuation.

\*Chronic – hard swelling – cold – not painful.

Diagnosis:

1-Case history.

2-palpation.

3-Exploratory puncture.

Differential diagnosis:

1-Hematoma.

2-Cyst.

3-Tumor.

4-Hernia.

Treatment

In case of mature - open – evacuate-irrigate with tincture iodine5%,put saturated gauze with tincture iodine in drained cavity.

Immature abscess.(ripen,open and evacuate……)

Ripen by:

1-Hot fomentation.

2-Blister or iodine ointment 5%.

-mature abscess is:

\*Spherical fluctuation or palpation

\*Pointed in the middle sometimes burst spontaneously and pus gets out.

If not—open and evacuate

(Do not open immature abscess because secondary abscesses may form).

Abscess is opened by scalpel sometimes by trocar or thermocautery

Opening is done at most dependent part of abscess.