

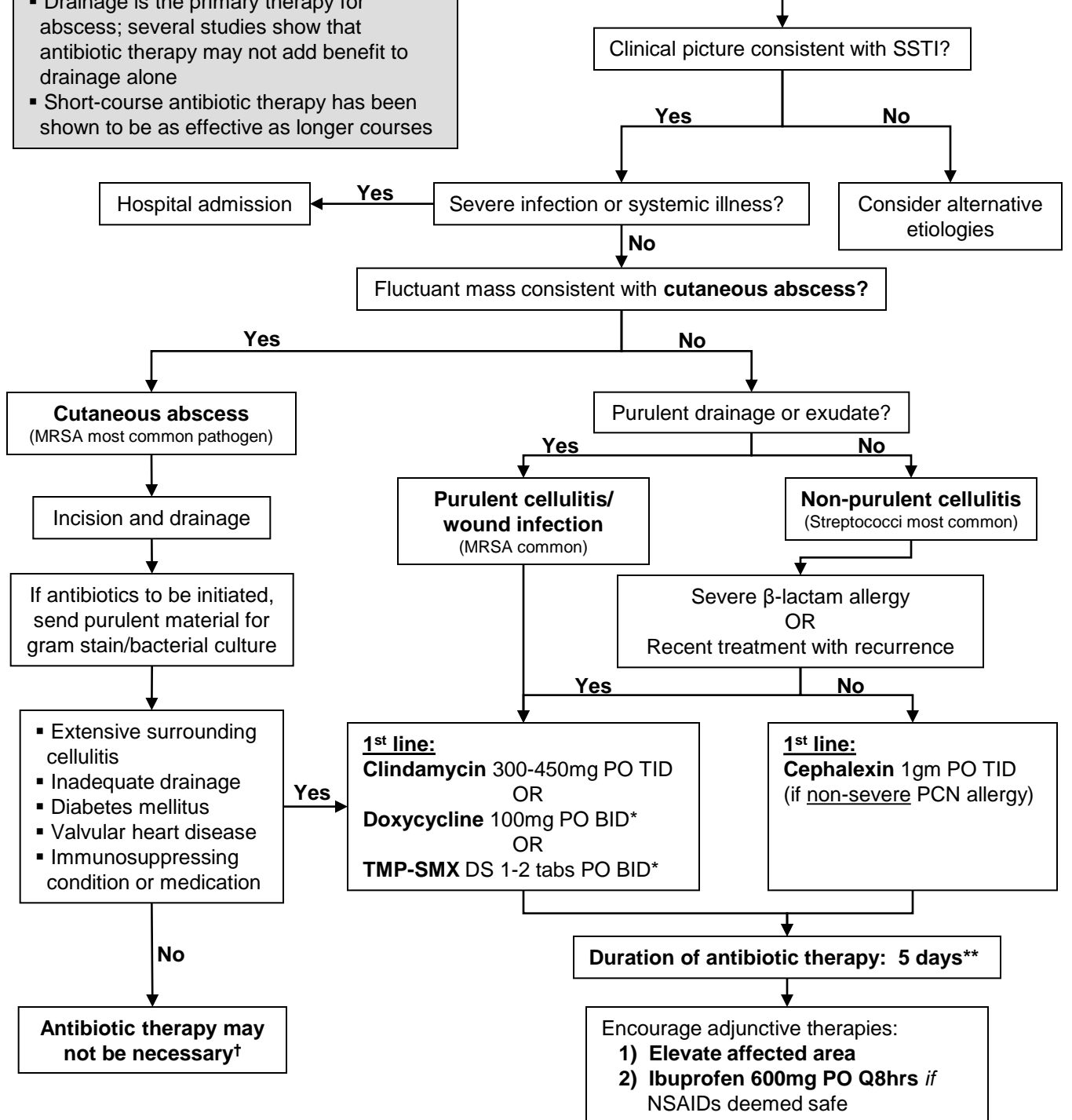
Skin and Soft Tissue Infection in Non-Pregnant Adults

Key points

- Beta-hemolytic streptococci are the most common cause of non-purulent cellulitis
- MRSA is the most common cause of cutaneous abscess and purulent infections
- Drainage is the primary therapy for abscess; several studies show that antibiotic therapy may not add benefit to drainage alone
- Short-course antibiotic therapy has been shown to be as effective as longer courses

Possible signs and symptoms of skin and soft tissue infection (SSTI):

- | | |
|-----------------------|----------------------------|
| 1) Cutaneous erythema | 4) Pain |
| 2) Cutaneous warmth | 5) Tenderness to palpation |
| 3) Swelling | 6) Fever |



Note This is intended only as a guide for evidence-based decision-making; it is not intended to replace clinical judgment. Assess for antibiotic allergies and use alternative agents as appropriate. Suggested antibiotic doses are for normal renal function; adjust for renal impairment when necessary.

*Trimethoprim-sulfamethoxazole and doxycycline may lack sufficient coverage against Grp A streptococci; not recommended for simple cellulitis

**duration of therapy may be extended for poorly responsive disease

†several studies suggest incision and drainage alone may be sufficient for immunocompetent patients with skin abscess: *Antimicrob Agents Chemother* 2007;51:4044-8; *NEJM* 2006;355:666-74; *Arch Surg* 2006;141:850-4

Other references: *Clin Infect Dis* 2005;41:1373-1406, *Clin Infect Dis* 2011; 52:285-92; *Am J Med* 2008; 121:419-425