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Taylor's flap reconstruction following abdominoperineal resection for advanced hidradenitis suppurativa – a case series and literature review

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Abstract

Introduction: Hidradenitis suppurativa (HS) is a chronic, relapsing inflammatory skin disorder primarily affecting intertriginous regions. In advanced stages, it can lead to extensive scarring, sinus tract formation, and significant impairment in quality of life. While early-stage disease may respond to medical management, severe and refractory cases often require subsequent radical surgical intervention. This report presents two cases of extensive perineal HS managed through abdominoperineal resection followed by reconstruction with a pedicled oblique rectus abdominis myocutaneous flap (Taylor's flap).

Case presentation: Two patients, a 49-year-old man and a 67-year-old woman, presented with long-standing, relapsing perineal HS unresponsive to conservative therapies. Both were active smokers with significant disease burden. After multidisciplinary evaluation, each underwent abdominoperineal resection followed by reconstruction using a pedicled Taylor's flap. Additional procedures included excision of inguinal lesions with split-thickness skin grafting. Postoperative complications included venous congestion of the flap, partial dehiscence, and one case of uncomplicated eventration. All complications were managed successfully. Despite these issues, both patients recovered well and remained disease-free at 3.5 and 2.5 years of follow-up, respectively.

Conclusion: In highly selected patients with severe, refractory HS, abdominoperineal resection combined with Taylor's flap reconstruction can be a successful salvage strategy. While postoperative complications can occur, they are manageable with appropriate care. These cases underscore the importance of a multidisciplinary approach and demonstrate that radical surgery may be curative in advanced HS when conservative measures fail.

Keywords: Hidradenitis suppurativa; Taylor's flap; abdominoperineal resection; plastic surgery; reconstructive surgery.

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