VOLUME - 15, ISSUE - 05, MAY - 2026 • PRINT ISSN No. 2277 - 8160 • DOI : 10.36106/gjra

Original Research Paper

General Surgery

ROLE OF UPPER GASTROINTESTINAL ENDOSCOPY IN DIAGNOSIS AND MANAGEMENT OF PERSISTENT DYSPEPSIA: A PROSPECTIVE STUDY

Dr. Rajshrey Hirapure — Department of General Surgery, MGM Medical College, Navi Mumbai

Prof. Dr. Nandkishor Narwade — Department of General Surgery, MGM Medical College, Navi Mumbai

Dr. Indrajeet Nikam — Assistant Professor, Department of General Surgery, MGM Medical College, Navi Mumbai

ABSTRACT

Background: Dyspepsia is a common gastrointestinal complaint encountered in clinical practice. Upper gastrointestinal endoscopy plays an important role in identifying organic pathology in patients with persistent dyspepsia. **Aim:** To evaluate the role of upper gastrointestinal endoscopy in the diagnosis and management of persistent dyspepsia. **Materials and Methods:** A prospective observational study was conducted on 200 patients presenting with dyspepsia lasting more than four weeks. Clinical evaluation and upper GI endoscopy were performed in all patients. **Results:** Abnormal endoscopic findings were observed in 72% of patients. Gastritis was the most common finding followed by esophagitis and duodenitis. Alarm symptoms showed significant association with malignancy. **Conclusion:** Upper GI endoscopy remains an essential diagnostic modality in evaluating persistent dyspepsia, especially in patients presenting with alarm symptoms.

KEYWORDS : Dyspepsia, Upper GI Endoscopy, Gastritis, Esophagitis, Alarm Symptoms

INTRODUCTION

Dyspepsia is characterized by upper abdominal discomfort, epigastric pain, bloating, nausea, heartburn, and vomiting. It affects a significant proportion of the population and contributes to increased healthcare burden. Upper GI endoscopy allows direct visualization of the mucosa and facilitates histopathological diagnosis.

AIM AND OBJECTIVES

To evaluate the role of upper gastrointestinal endoscopy in diagnosis and management of persistent dyspepsia.

MATERIALS AND METHODS

This prospective study included 200 patients with dyspeptic symptoms persisting for more than four weeks. Detailed history, physical examination, laboratory investigations, and upper GI endoscopy were performed. Data were analyzed using descriptive statistics and chi-square test.

RESULTS

The majority of patients belonged to the 25–55 years age group. Males constituted 73% of cases. Gastritis was the most common endoscopic finding. Alarm symptoms were significantly associated with gastrointestinal malignancy.

DISCUSSION

The present study demonstrates a high prevalence of abnormal endoscopic findings among patients with persistent dyspepsia. Similar observations have been reported in previous studies by Ziauddin et al., Choomsri et al., and Khan et al.

CONCLUSION

Upper gastrointestinal endoscopy is an invaluable diagnostic tool in persistent dyspepsia and should be strongly considered in patients with alarm symptoms.

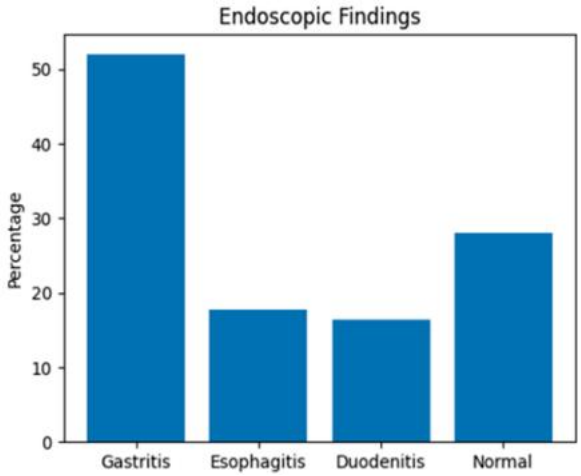
Table 1: Age Distribution

Age Group	Number of Patients
<25	30
26–35	42
36–45	40
46–55	38
56–65	22
66–75	20
76–85	6
>86	2

Table 2: Endoscopic Findings

Finding	Percentage
Gastritis	52.06%
Esophagitis	17.81%
Duodenitis	16.44%
Normal Study	28%

Figures and Charts



REFERENCES

1. Ikenberry SO et al. Gastrointest Endosc. 2007;66:1071-1075.
2. Talley NJ, Vakil N. Am J Gastroenterol. 2005;100:2324-2337.
3. Ziauddin. J Postgrad Med Inst. 2003;17:235-239.
4. Choomsri P et al. Thai J Surg. 2010;31:7-12.
5. Sarwar M et al. Pak Armed Forces Med J. 2004;54:48-50.
6. Khan N et al. JPMI. 2007;21:212-216.
7. Mohd Mubarik et al. JK Practitioner. 2012;17:15-19.