

Duodenal Perforation- A Prospective Study of One Year

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ABSTRACT Introduction: Duodenal perforation is still the most common surgical emeregency in our country. Perforated peptic ulcer is a serious complication of peptic ulcers with potential risk of grave complications .This study was carried out to document etiologies, clinical features and management of duodenal perforation and to share our experience.Material and methods: In this study, 80 cases of Duodenal perforation were included. Study was done in surgery department of JLNMCH, Bhagalpur, Bihar from September 2015 to September 2016. Thorough examination, investigations and surgeries were performed. Results: Peptic ulcer disease was the commonest cause of duodenal perforation in 60 patients. Males accounted for 65% and females for 15% patients. X-ray chest PA view erect was diagnostic of pneumoperitoneum in 75 patients. All ulcer perforations were small < 1 cm in diameter on the anterior portion of the first part of the duodenum and were repaired by a Cellan Jones omental patch. There were 5 mortalities due to septicaemia. Conclusion: Duodenal perforations still account for an important cause of surgical emergency in third world countries like ours. Use of analgesics, alcohol, tobacco and trauma are the leading cause of duodenal perfortions. Indiscriminate use of NSAIDs, steroids, alcohol and tobacco addiction leads to peptic ulceration. The earlier is the treatment, the better will be the result

METHODS

In this study, 80 cases of Duodenal perforation were included. Study was done in surgery department of JL-NMCH, Bhagalpur, Bihar from September 2015 to September 2016. Thorough examination, investigations and surgeries were performed. Only those patients whose diagnosis of duodenal perforation was confirmed on laparotomy were included in this study. After preliminary resuscitation and investigations, patients were taken for emergency surgery. The diagnosis was based on a history of chronic ingestion of pain killers, steroids, cigarette/beedi smoking, chronic alcoholism or trauma with severe epigastric pain, abdominal distension, fever, vomiting and obstipation. X-ray chest PA view erect was diagnostic of pneumoperitoneum in 75 patients.

RESULTS

In this study it was found that the Peptic ulcer is the commonest cause of duodenal perforation accounting for 60 patients. 5 were due to trauma. 10 were due to alcohol consumption and 5 were due to tobacco chewing. The age group was 20-65 years of age. Male were 65 and female were 15. Most common chief complaint was pain abdomen and noy passing stool and flatus. X-ray chest PA view erect was diagnostic of pneumoperitoneum in 75 patients. All ulcer perforations were small < 1 cm in diameter on the anterior portion of the first part of the duodenum and were repaired by a Cellan Jones omental patch. There were 5 mortalities due to septicaemia. Complications after surgery were sursical site infection in 5 cases.

DISCUSSION

In this study, 80 cases of Duodenal perforation were included. Study was done in surgery department of JL-NMCH, Bhagalpur, Bihar from September 2015 to September 2016. The age group was 20-65 years of age. Male were 65 and female were 15. Male were most commonly involved in this disease than females. All the patients admitted were either farmers or coolie or labours by occupation. Out of 80 cases studied Peptic ulcer is the commonest cause of duodenal perforation accounting for 60 patients. 5 were due to trauma. 10 were due to alcohol consumption and 5 were due to tobacco chewing. Smoking, alcohol and NSAID abuse accounted for most of the cases due to peptic ulcer but probably more than one factor contributed to the disease. Tests for H.Pylori not being commonly available their exact contribution in the etiology of peptic ulcer in this study is not known. Most common chief complaint was pain abdomen and noy passing stool and flatus. X-ray chest PA view erect was diagnostic of pneumoperitoneum in 75 patients. Omentopexy is a simple and safe procedure which can be performed in a very short time and is easy to perform. Surgeries were done for two hours. Hospital stay of the patients were approximately 10 days. Two patients died due to septisemia.

CONCLUSION

Duodenal perforations still account for an important cause of surgical emergency in third world countries like ours. Perforation of peptic ulcer remains a frequent clinical problem in our environment predominantly affecting young males. Use of analgesics, alcohol, tobacco and trauma are the leading cause of duodenal perforations. Indiscriminate use of NSAIDs, steroids, alcohol and tobacco addiction leads to peptic ulceration. Prompt diagnosis, aggressive resuscitation, early surgery and the quickly performed simple Cellan Jones omental patch repair results in high survival in these moribund patients. Omentopexy is a simple and safe procedure which can be performed in a very short time and is easy to perform. The earlier is the treatment, the better will be the result.

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