



Surgery

A STUDY OF UPPER GASTROINTESTINAL ENDOSCOPY FINDINGS IN SYMPTOMATIC GALL STONE DISEASE PATIENTS IN OUR RESEARCH INSTITUTE.

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ABSTRACT

A study of Upper gastrointestinal endoscopy as an investigative modality to find out other associated disorders of upper gastrointestinal tract in patients with ultra sonogram proven gall stones presenting with chronic dyspeptic symptoms.

KEYWORDS : Upper Gastrointestinal Endoscopy, Gall Stone, Dyspepsia.

INTRODUCTION:

In India for past few years there is a marked increase in the incidence of gall stones and it is due to the advance techniques in imaging and lifestyle modification. Most of the studies show that asymptomatic gall stones are more than the symptomatic stones which are encountered during routine abdominal ultra-sonogram for various abdominal related problems. Many prospective studies show that the asymptomatic gall stones does not cause complication during the life time.

The aim of the study is to determine the frequency of diagnosis of significant findings by upper GI endoscopy with ultra-sonogram proven gall stone disease with chronic dyspeptic symptoms.

MATERIALS AND METHODS:

The study was conducted in the Meenakshi Medical College Hospital and Research Institute for 12 months January 2016 to December 2017. A written informed consent was obtained from all the study subjects.

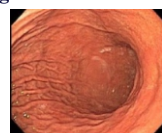
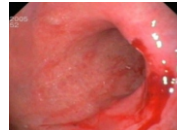
Inclusion criteria: 1. Patients of greater than 15 years of age. 2. Patients who have either single or multiple stones in gall bladder only as shown in ultrasound. 3. Patients presenting with any one or more of the following symptoms. a. Pain or discomfort in upper abdomen. b. Nausea or vomiting. c. Early satiety. d. Bloating or fullness of abdomen. 4. Patients who are willing to participate in the study and have given written consent.

Exclusion criteria: 1. Patients less than 15 years of age. 2. Patients with acute abdomen and / or biliary colicky pain. 3. Patients whose general condition is not stable. 4. Patients not willing to participate or willing to sign the consent.

Procedure of study: The patients fulfilling the inclusion criteria either from general surgery out-patient department or referred from other departments are selected. Complaints and history of the patient taken with a Performa, general and physical examination done and endoscopy is performed in the general surgery endoscopy room. An informed consent was obtained from all patients prior to the procedure.

RESULTS :

Normal Gastroesophageal Junction.

**Normal Gastric mucosa****Reflux esophagitis.****Gastritis****GENDER DISTRIBUTION OF TOTAL SUBJECTS:**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	82	73.2	73.2	73.2
	Male	30	26.8	26.8	100.0
	Total	112	100.0	100.0	

Females comprised the majority (73%) of the study population

DISTRIBUTION OF SUBJECTS WITH NORMAL STUDY:

ENDOSCOPIC FINDINGS	Frequency	Percent	Valid Percent	Cumulative Percent
SIGNIFICANT LESIONS	82	73.2	73.2	73.2
NORMAL	30	26.8	26.8	100.0
Total	112	100.0	100.0	

Significant lesions were found in the majority i.e. 73.2% of the total subjects.

DISTRIBUTION OF VARIOUS ENDOSCOPY FINDINGS:

ENDOSCOPY FINDING	YES	NO
NORMAL STUDY	26.8%	73.2%
GASTRITIS	48.2%	51.8%
GASTRIC ULCER	1.8%	98.2%
DUODENITIS	25.9%	74.1%
DUODENAL ULCER	1.8%	98.2%
REFLUX ESOPHAGITIS	11.6%	88.4%
HIATUS HERNIA	9.8%	90.2%

Among the significant lesions found on endoscopy, the commonest finding was gastritis (48.2%) followed by duodenitis (25.9%).

CONCLUSION: The prevalence of significant findings in upper gastrointestinal scopy of ultrasound proven symptomatic gall stone disease with chronic dyspepsia as symptoms is relatively higher than the prevalence of normal study. The significant findings in symptomatic patients prevalence is higher in females than males in all age groups. The prevalence of significant lesions was highest in the age group of >40 years. Increase in the age will be increase in the associated significant findings. The prevalence of gastritis as a single diagnosis is more prevalent in this part of the world and in our institution. Gall stone disease clinical symptoms are complex and may resemble other upper gastrointestinal disease.

So using a upper GI scope should be made routine for all gall stone disease patients prior to elective surgical cholecystectomy. As it helps to identify other potential medically treatable diseases and hence cholecystectomy rates can be reduced. The postoperative persistence of symptoms will reduce due to single investigation. Thus upper gastrointestinal endoscopy has a very important and vital role in initial evaluation and investigation of patients with symptomatic gall stone disease

REFERENCES

1. The predictive value of pre-operative symptoms including upper gastrointestinal endoscopy before cholecystectomy for elective symptomatic cholecystolithiasis. Karmacharva.A, Malla BR, Joshi HN, Gurung RB, Rahchandari M.2013 oct-Dec.
2. Value of EGD in patients referred for cholecystectomy: a systematic review and meta-analysis. Laurber M.Gastrointest Endosc. 2015 jul.
3. Alfred Cusschieri, RobertSteele, Abdool Moossa et al, essential surgical practice, higher surgical training in general surgery, 4 th edition, Arnold2002., 410-412.
4. Town stead, beauchamp et al, Sabiston textbook of Surgery, Volume 2,17 th edition, Saunders 2004, 1607-1611.