# **General Surgery**

# AN OBSERVATIONAL STUDY ON INCIDENCE OF "ABDOMINAL MALIGNANCIES" PRESENTING AS "SURGICAL EMERGENCY" TO **EMERGENCY DEPARTMENT GGH, KAKINADA.**

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# **KEYWORDS:**

# INTRODUCTION

- Acute abdomen is a challenging clinical scenario that requires a thorough & expeditious workup to determine the need for operative intervention & initiate appropriate management protocol
- Most common symptom that brings the patient to ED.
- ABDOMINAL MALIGNANCY is one of the cause for ACUTE ABDOMEN.

The main problem with this condition is associated with -

- Lack of preoperative evaluation
- Preparation of the patient
- Contamination that occurs in case of perforation

# AIMS & OBJECTIVES

- To know the incidence of malignancies in acute abdominal 1. emergencies.
- 2 To identify the most common malignancy presenting as surgical emergency in our region.
- 3 To identify the most common presentation of such malignancies.

# **MATERIALS & METHODS**

A total of 250 patients who presented with non-traumatic acute abdominal pain to our ED, GGĤ KAKINADA between July,2020 to July,2022(period of 2 years) were taken for the study.

The incidence of malignancy in these cases was statistically assessed.

Detailed history, physical examination, investigations like X-ray erect abdomen, USG & CT abdomen were done.

# **Inclusion Criteria:**

All the patients with age >20 years who presented to our Emergency department with acute abdominal symptoms were included in the study.

# **Exclusion Criteria:**

- Patients below the age 20 years
- Trauma related abdominal emergencies
- Patients who are not willing to give consent
- Patients who were diagnosed with malignancy earlier with confirmed HPE.

#### Study details

Patients were interviewed in the emergency department after taking informed consent.

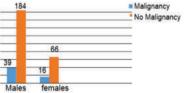
Detailed history was taken regarding symptoms & any previous history & workup done.

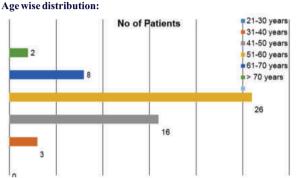
General examination, local examination, routine & radiological investigations were done.

#### RESULTS

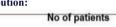
A total of 250 patients who were operated for non-traumatic acute abdomen were included in this study. Of total 250 cases, 55 patients (22%) patients had malignancy.

# Sex wise distribution:



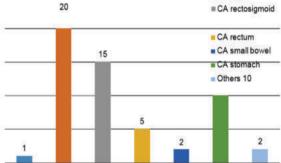


# Site wise distribution:



CA appendix

CA colon



# Distribution of presenting symptoms:

S No	PRESENTING SYMPTOMS	Number of patients
1	Abdominal pain	250
2	Abdominal Distension	200
3	Vomitings	115
4	Obstipation/Constipation	152
5	Diarrhoea	102
6	Bleeding p/r	80

The most common presentation of malignancy was Obstruction (72%) followed by Perforation (23%) Most of the patients who ended up with malignancy, were found to be suffering from low grade pain for longer durations.

# DISCUSSION

- The incidence of malignancy among patients presenting to emergency department with acute abdomen requiring laparotomy in my study was 22%.
- In my study incidence of malignancy with emergency presentation among males was 21% and in females it was 24%.
- Of the 55 patients presented with malignancy 26 patients(~50%) were between 51-60 years...
- Incidence of GI MALIGNANCIES presenting as acute abdomen is highest among elderly age group.
- Obstruction was the most common presentation of malignancy constituting about 72%, with Carcinoma COLON being the most common postoperative histopathological diagnosis.
- Perforation was the 2nd most common presentation constituting about 23%, with Carcinoma STOMACH, contributing to most cases of perforation.



#### CONCLUSION

- In this era, there is a rising trend of incidence of GI Malignancies. . Often a proportion of gastrointestinal malignancies are diagnosed through emergency, in a tertiary health care centre.
- Acute presentations are more common in elderly age group. .
- Definitely Malignancies is one entity to be kept in mind while managing an emergency room.
- Focus to be given mainly for "Early detection of malignancies" by "SCREENING PROGRAMMES.
- There should be research work in surgical oncology for efficient tackling of emergency oncological resections.

# REFERENCES

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