



NSAIDS: A RISK FACTOR AFFECTING PEPTIC ULCER PERFORATION

Surgery

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ABSTRACT

INTRODUCTION: A peptic ulcer is a defect in the upper gastrointestinal mucosa that extends through the muscularis mucosa into deeper layers of the gut wall. Non-steroidal anti-inflammatory drugs (NSAIDs) are the major risk factors for peptic ulcer disease. Long-term use of NSAIDs, however, can cause gastrointestinal (GI) ulcers and potentially life-threatening ulcer complications. **MATERIAL AND METHOD:** The present study was conducted on 100 patients of peptic ulcer of either sex in Department of Surgery, Mahatma Gandhi Medical College & Hospital, Jaipur. History of any other co morbid illness and any drug being taken with its time duration were recorded in detail. **RESULT AND DISCUSSION:** From this study, it was observed that among the 69 patients of duodenal perforation, 73.91% were taking NSAID. Similarly among the 31 patients of gastric perforation 80.64% were taking NSAID. Overall total 76% patients were taking these drugs. **CONCLUSION:** It is concluded from this study that a strong statistical correlation was found between use of NSAIDs and peptic ulcer perforation.

KEYWORDS

NSAIDs, Peptic Ulcer, Non-steroidal, Anti-inflammatory drugs

INTRODUCTION

Peptic ulcer perforation with subsequent peritonitis is commonest complication of peptic ulcer disease and is a great surgical emergency having great mortality and morbidity.

Non steroidal anti inflammatory drugs (NSAIDs) are an important risk factor in developing peptic ulcer. Non-steroidal anti-inflammatory drugs (NSAIDs) have been used for many years for analgesic, anti-inflammatory, and more recently in the case of aspirin, antithrombotic purposes.

There is evidence from both animal and human studies that NSAIDs retard the healing of gastric ulcers. Peptic ulcer perforation has always remained a challenge to surgeons regarding its etiology and complications. Thus this study was planned to explore the prolonged used of NSAIDs as a risk factor for the disease.

AIMS & OBJECTIVES

To explore the prolonged used of NSAIDs as a risk factor for the peptic ulcer perforation.

MATERIAL & METHODS

The present study conducted on 100 patients of both sex admitted for peptic ulcer perforation in the Department of General Surgery, Mahatma Gandhi Medical College, Jaipur from Jan 2017- June 2018. The selected patients were then informed about the procedure and written informed consent was taken. A detailed history was taken from every patient regarding the onset of disease and duration of presenting symptoms. History of any other co morbid illness and any drug being taken was recorded in detail.

RESULT & DISCUSSION

Peptic ulcer is a defect in the upper gastrointestinal mucosa. In the present study, it was observed that the prevalence of peptic ulcer perforation was much higher in males (92%) than females (8%).

Peptic perforation was more common (76%) in NSAID's users as compare to non-NSAIDs users (24%). These findings are almost comparable to Tayside et al 1998 (74%) and Odense et al 2001 (75%). Further it was also observed that the overall incidences of duodenal ulcers (69%) were much higher than gastric perforation (31%).

Further, from this study it was observed that among the 69 patients of duodenal perforation, 73.91% were taking NSAID. Similarly among the 31 patients of gastric perforation 80.64% were taking NSAID. Overall total 76% patients were taking these drugs.

Allison MC et al, 1992 also reported that ulcers of the stomach or duodenum were found in 21.7% of patients on NSAIDs and 12.3% of those not on NSAIDs ($p < 0.001$), and small intestinal ulceration was found in 8.4% of NSAID users and 0.6% of patients not on NSAIDs ($p < 0.001$).

SUMMARY & CONCLUSION

In our study, a strong statistical correlation was found between use of NSAIDs and peptic ulcer perforation. Thus it can be concluded that NSAIDs are a significant risk factor that enhances the risk for peptic ulcer perforation

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