

A clinical study on prognostic factors in duodenal ulcer perforation

A.Ramprasath

Abstract

Background: Perforation is the most common complication of peptic ulcer disease. In spite of modern progress in the management, it is still a life-threatening catastrophe. Perforation may occur in a patient with previous history of ulcer disease or it may happen without any prior symptoms. **Methods:** This study comprises a retrospective analysis of all patients diagnosed of perforated duodenal ulcer disease at TVMCH, Tirunelveli INDIA. Morbidity and mortality are associated with age of the patients, haemodynamic instability, operative delay, site of the ulcer, peritoneal contamination and quality of postoperative care

AIM OF STUDY :

To determine relation between postoperative morbidity and comorbid disease and preoperative riskfactors in perforated duodenal ulcers

INCLUSION CRITERIA

All non traumatic and non malignant perforated duodenal ulcers above 12 years of age

EXCLUSION CRITERIA

Perforated malignant ulcers

Traumatic perforation

MATERIALS AND METHODS

This study comprises a prospective analysis of all patients diagnosed with perforated duodenal ulcer in TVMCH, Tirunelveli. Patients with perforated malignant ulcer, traumatic perforation and gastrinoma were excluded from the study.

The following data should be collected from hospital records: age, sex, previous history of ulcer disease; use of tobacco, alcohol, corticosteroid and NSAIDs; duration of symptoms suggestive of perforation; location, size of perforation and amount of peritoneal contamination. Treatment outcome was elaborated by postoperative complications, hospital stay and death.

The size of ulcer was noted in diameter in millimeter. Haemodynamic instability at the time of presentation was defined as a systolic blood pressure less than 90 mmHg. A delay in treatment was defined as an interval of more than 24 hours until surgery from the suspected time of perforation .

Conclusion:

The prognostic indicators can assist in risk stratification , The use of this system can help delineate high risk patients and the identify need of early intervention and prompt treatment for better outcome

Keywords: perforation, prognostic factors, mortality, morbidity, ^{prosspective} study



