A STUDY ON DUODENAL ULCER PERFORATION: RISK FACTORS AND PROGNOSTIC DETERMINANTS

ABSTRACT

BACKGROUND:

Duodenal ulcer perforation is one of the acute abdominal emergencies in the surgical field. The present study deals with one of the complications of peptic ulcer, namely duodenal ulcer perforation, trends in age distribution of occurrence, risk factors, seasonal variation, outcome of operative and non-operative modalities of treatment and factors influencing the prognosis of the disease.

AIM OF THE STUDY:

The aims of the study are-

1. To study the age group, duodenal ulcer perforation commonly occurs.

2. To study the risk factors and seasonal trends.

3. To study the prognostic factors influencing the disease process.

4. To study the outcome of operative and non—operative treatment, with its morbidity and mortality.

MATERIALS TO BE USED:

This study was conducted in Department of General Surgery, chengalpattu medical college and hospital during the period of October 2016 to September 2017. The diagnosis of duodenal ulcer perforation was that established by the
admitting surgeon, based on clinical features and supported by radiological evidence and confirmed at operation. Surgery was defined as urgent (less than 4 hours between admission and surgery), same day (4-24 hours) and delayed at a later time during the same hospital admission. Operative details included the site, size of perforation and nature of operation perforation performed. Mortality was defined as death following surgical procedure. Post operative morbidity was defined in terms of duration of hospital stay and associated complications following surgery.

**RESULTS:**

One hundred and two cases of Duodenal ulcer perforation were studied. In all 100 cases underwent Laparotomy and the perforation was found in the anterior aspect of first part of the duodenum. From our study Male to Female ratio was 33:1. With 78 patients (76.47%) belonged to lower socioeconomic status. Of 102 patients 68 patients (66.67%) gave history of smoking, 38 patients were exclusively smokers. And 62 patients (60.78%) gave history of peptic ulcer disease. Then 26 patients (25.49%) gave history of (NSAIDS) drug intake prior to developing duodenal ulcer perforation. The incidence of cases were more common in winter period.
CONCLUSION:

The conclusion from our study is

1. Duodenal ulcer perforation is becoming more common in the age group > 50 years.

2. Associated risk factors are found to be smoking, alcohol intake and previous history of acid peptic disease.

3. NSAIDs intake are associated with increased risk of perforation commonly in older age group (> 60 years).

4. Wound infection is the common post-Op complication encountered.

5. Mortality rate is 8.82% in our study.