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Original Research Paper

General Surgery

A STUDY ON DIAGNOSTIC UPPER GASTROINTESTINAL ENDOSCOPY IN PATIENTS WITH UPPER GASTROINTESTINAL BLEED

Dr. Pradeep Chapala — Assistant Professor

Dr. Praneetha Balijepalli — Assistant Professor

ABSTRACT Upper gastrointestinal bleed is described as blood loss from a gastrointestinal source above the ligament of Treitz. It can manifest as hematemesis, hematochezia, or melena.Estimated mortality rates are between 2 and 15 percent.The peptic ulcer disease is the most common lesion found on endoscopy with prevalence of 54%.Varices contributes second common lesion, next to peptic ulcer disease in UGI bleed with prevalence of 16%.Hence, Upper gastrointestinal endoscopy has a very important role in evaluation of cause of minor, moderate and major upper GI bleed.

KEYWORDS : Upper gastrointestinal bleed, Upper G.I.endoscopy, Peptic Ulcer,Varices

INTRODUCTION

Bleeding can occur from multiple different lesions and many sites in the gastro intestinal tract. Gastro intestinal bleeding is a common clinical problem requiring more than3,00,000 hospital admissions annually.Upper Gastrointestinal bleeding, which most commonly arise due to erosion of mucosa, account for upto 20,000 deaths annually.Bleeding from upper gastrointestinal tract is approximately five times morecommon than bleeding from lower gastrointestinal tract. Bleeding may be massive or trivial, obvious or hidden, which can present as either hematemesis, malaena, occult, obscure. The need for diagnosis of gastrointestinal bleeding is to determine:

- Source of bleeding
- Stop active bleeding
- Treat underlying abnormality
- Prevent recurrent bleeding.

Aims And Objectives :

1) To evaluate the primary cause of upper gastrointestinal bleeding on Upper Gastro-intestinal Endoscopy in patients admitted for UGI bleed.
2) To find out the prevalence of nature of lesion in patients with minor,moderate, major bleed in PESIMSRKuppam, who are undergoing upper GI endoscopy for various Gastrointestinal disorders.

MATERIALS AND METHODS :

This study was conducted for all patients presenting with upper gastrointestinal bleeding who underwent Upper GI endoscopy(Esophagogastroduodenoscopy).

Place of study: Department of General Surgery, PES Institute of Medical Sciences and Research, Kuppam, Andhra Pradesh, India

Period of study : March 2020 to March 2021

Consent: Informed consent was obtained from the participants.

MS Excel 2007 was used as a data directory, and the data was further analyzed using SPSS version 21.

Inclusion Criteria

1) All adult patients of both sexes with definite history of vomiting of frank blood or coffee ground coloured vomit or passed dark coloured stools were chosen for this study.
2) Inpatients admitted for other illnesses and who subsequently developed UGI bleeding following administration of drugs like aspirin and other NSAIDS, steroids, anticoagulants and other gastro toxic drugs were also included.

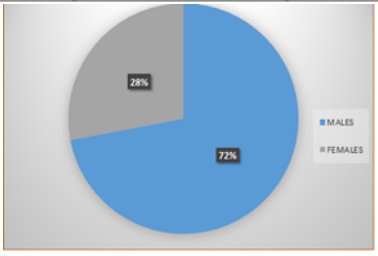
Exclusion Criteria

1) Patients with history of epistaxis and bleeding gums and subsequently developed doubtful hemetemesis.
2) Bleeding and clotting disorders
3) Hematological disorders

RESULTS :

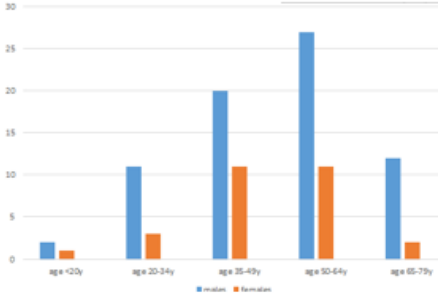
1)sex Distribution:

	Number of cases	%
MALE	72	72 %
FEMALE	28	28 %
TOTAL	100	100 %



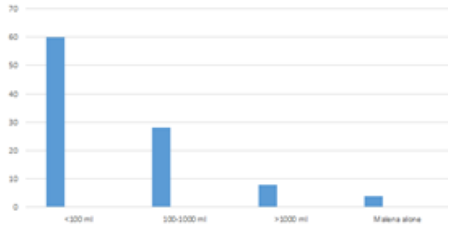
2)age Distribution:

S.No	Age Group	Male	Female	Total
1	Age<20	2	1	3
2	Age 20 -34	11	3	14
3	Age 35 – 49	20	11	31
4	Age 50 – 64	27	11	38
5	Age 65 - 79	12	2	14
	Total	72	28	100



3)quantity Of Blood Loss:

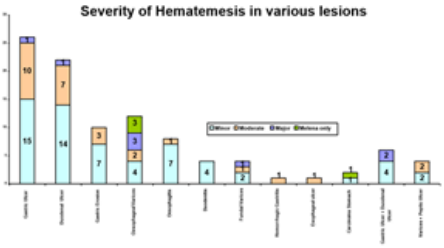
S.No	Quantity of blood loss	Number of Patients
1.	< 100 ml	60
2.	100 to 1000 ml	28
3.	> 1000	8
4.	H/o of Malena alone	4



4)type And Severity Of Lesion:

Sl.No	Nature of Lesion	Minor	Moderate	Major	Melena only
1	Gastric Ulcer	15	10	1	0
2	Duodenal Ulcer	14	7	1	0
3	Gastric Erosion	7	3	0	0
4	Oesophageal Varices	4	2	3	3
5	Oesophagitis	7	1	0	0
6	Duodenitis	4	0	0	0
7	Fundal Varices	2	1	1	0
8	Hemorrhagic Gastritis	0	1	0	0
9	Esophageal ulcer	0	1	0	0
10	Carcinoma Stomach	1	0	0	1
11	Gastric Ulcer + Duodenal Ulcer	4	0	2	0
12	Varices + Peptic Ulcer	2	2	0	0
	Total	60	28	8	4

5)type And Severity Of Lesion:



DISCUSSION:

1. Sex:

Out of one hundred patients studied, seventy two were male patients and twenty eight were female.

2. Age:

The percentage of number of patients in the age group of equal to or above 50 yearsof age was 52 % comprising more than ½ of all the patients. In this study it was found that elderly patients bleed in a high incidence because the frequency ofbleeding is directly related to the duration of the disease.

The increased incidence of UGI bleed in elderly individuals were also due tofrequent prescription of NSAIDs and aspirin for their cardiac problems and therelative risk was 2.0 times higher than the others.

3. Severity Of Hemetemesis:

Percentage of patients with one or two episodes of hematemesis was 76%. 60% of the patients admitted for UGI bleed were having minor UGI bleed (< 100 ml).

Only 8 % of the patients had severe UGI bleeding (1000ml) in the present study and majority of the patients 50% were found to have oesophageal varices and fundal varices on endoscopy.

In this study among 8 cases of major UGI bleed , Esophageal varices (3 cases) and Fundal varices (1 case) contributes 50% of total number of major UGI bleed.

Rupture of varices is the most common cause of life threatening hemorrhage.Risk of bleeding is greatest when varices are large and when they are prominent in the gastric fundus.

CONCLUSIONS:

The study on endoscopic findings in upper gastro intestinal bleed concludes that-

1) The peptic ulcer disease was the most common lesion found on endoscopy with prevalence of 54%.
2) Varices contribute second common lesion, next to peptic ulcer disease in UGI bleed with prevalence of 16%.
3) Minor UGI bleed was the commonest presentation.
4) Majority of lesions (60%) presented with minor UGI bleed, 28% lesions presented as moderate UGI bleed. Only 8% presented as major UGI bleed.
5) Varices account for the most common cause for major UGI bleed contributing 50%.
6) Gastric ulcer was commonest lesions accounting for 37 cases (37%) among 72 cases having single acid peptic lesions on endoscopy.
7) The second most common is duodenal ulcer (31%).

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