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There are few published surgical reports on peptic ulcer disease (PUD) in Ethiopia. Of 405 complicated peptic ulcer patients operated on in Tikur Anbessa Hospital, Addis Ababa, from 1997 to 2001, the records of 351 patients were retrieved and retrospectively analyzed to assess the pattern of PUD complication and the outcome of surgical treatment. During the study period, complicated PUD patients comprised 3.8% of the total major surgical procedures. The male to female ratio was 5.6: 1.0. The mean age was 36.5 +/- 12.7 years. Of 351 patients, 337 (96%) had abdominal pain, in most epigastric, and 330 (94%) had vomiting as presenting complaints. Dehydration was observed in 44 (12.5%). Gastric outlet obstruction (GOO) was the commonest complication followed by perforation that necessitated surgical intervention. The commonest operative procedure was truncal vagotomy and drainage. Nearly 5.0% died in hospital, most from complicated perforated peptic ulcer. Follow-up was possible in 262 patients for a mean of 16.2 +/- 15.0 months. Dumping and diarrhea were observed in 2.7% and 0.4% of the patients, respectively. Bile reflux gastritis was encountered in 1.5%. Truncal vagotomy and drainage remained to be easily learnable procedures with acceptable morbidity and mortality rates