

I read with interest the report by Mohta *et al.*(1) on perforated duodenal ulcer in childhood. Peptic ulcer disease is not common in children and rarely suspected as a cause of abdominal complaints in this age group. Diagnosis is therefore made only when they develop complications, particularly in developing countries. Vague or unexplained abdominal pain or vomiting which may be the early symptoms are also the symptoms of parasitic infestation, malaria and gastro-intestinal infections, common problems in developing countries. These conditions are therefore more commonly suspected and little thought is given to peptic ulcer disease. This is compounded by the fact that upper gastro-intestinal endoscopy which is a useful diagnostic tool in peptic ulcer disease is not readily available in many hospitals in less developed countries.

In our experience in Zaria, Nigeria(2), six children aged 7-15 years had surgical treatment for duodenal ulcer in the 10 year period (1987-1996). Four of them had complications (pyloric stenosis 2, perforation 1, hemorrhage 1) and 2 were uncomplicated. As Mohta *et al.*(1) noted, children usually present when complications have occurred. Though in developed countries perforation and bleeding are the common complications(3), in Zaria(2) and another report from India(4), pyloric stenosis is more common, perhaps due to delayed diagnosis and chronicity.

Peritonitis in children in developing countries, though most commonly due to typhoid perforation and perforated appendicitis, may be due to perforated duodenal ulcer(1,2). Due to lack of suspicion, diagnosis is usually made at laparotomy. We prefer a simple closure and omental patch. However, in the fit child without much peritoneal contamination, truncal vagotomy and drainage can be performed if the surgeon has the experience to perform the operation. It is important for those caring for children in developing countries to have a high index of suspicion for peptic ulcer in children with recurrent abdominal pain so that early diagnosis can be made, and complications are avoided.

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