

11th Annual European Conference on

Gastroenterology

March 11-12, 2019 Amsterdam, Netherlands

J Clin Gastroenterol Hepatol 2019, Volume:3 DOI: 10.21767/2575-7733-C1-012

TRANSABDOMINAL SONOGRAPHY OF THE STOMACH & DUODENUM

Vikas Leelavati Balasaheb Jadhav

Patil University, India

TransAbdominal Sonography of the Stomach & Duodenum can reveal following diseases. Gastritis & Duodenitis. Acid Gastritis. An Ulcer, whether it is superficial, deep with risk of impending perforation, Perforated, Sealed perforation, Chronic Ulcer & Post-Healing fibrosis & stricture. Polyps & Diverticulum. Benign intra-mural tumours. Intra-mural haematoma. Duodenal outlet obstruction due to Annular Pancreas. Gastro-Duodenal Ascariasis. Pancreatic or Biliary Stents. Foreign Body. Necrotizing Gastro-Duodenitis. Tuberculosis. Lesions of Ampulla of Vater like prolapsed, benign & infiltrating mass lesions. Neoplastic lesion is usually a segment involvement, & shows irregularly thickened, hypoechoic & aperistaltic wall with loss of normal layering pattern. It is usually a solitary stricture & has eccentric irregular luminal narrowing. It shows loss of normal Gut Signature. Enlargement of the involved segment seen. Shouldering effect at the ends of stricture is most common feature. Enlarged lymphnodes around may be seen. Primary arising from wall itself & secondary are invasion from peri-Ampullary malignancy or distant metastasis. All these cases are compared & proved with gold standards like surgery & endoscopy. Some extra efforts taken during all routine or emergent ultrasonography examinations can be an effective non-invasive method to diagnose primarily hitherto unsuspected benign & malignant Gastro-Intestinal Tract lesions, so should be the investigation of choice.

drvikasjadhav@gmail.com