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HAEMATEMESIS AND MELAENA: 10 YEARS' EXPERIENCE

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Statement of the Problem: Haematemesis and melaena are amongst the serious complications of advanced liver cirrhosis which is a common disease in Egypt due to prevalence of HCV infection, but many other causes can lead to haematemesis and melaena as chronic peptic ulcer, non-steroidal anti-inflammatory drugs, overdose of Marevan & chronic use of Aspocid in patients suffering from C V (Cardiovascular) disease or C V Stroke or even chronic renal dialysis in patients who took heparin during dialysis.

Aim: This clinical study analyzed the causes of haematemesis & melaena among people living in Damietta, Egypt.

Patients & Methods: We retrospectively analyzed 567 patients who were admitted to our endoscopy unit at Damietta specialized hospital from April 2017 to November 2017. All are subjected to upper endoscopy within 8-10 hours after resuscitation by blood,

IV fluids, coagulants, vit.k, Sandostatin IV infusion & proton pump inhibitors.

Results: Sex: - Male 350 patients, female 217 patients. **Age:-** from 19y to 80y. The most common cause was bleeding esophageal varices (275/567), 48.5%. Gastritis & gastric erosions was the second cause (150/567), 26.4%.

Conclusions: Complications of liver cirrhosis still common in Egypt especially haematemesis due to esophageal varices. Band ligation is still standard treat for esophageal varices. There is rapid increase in the rate of incidence of haematemesis due to non-steroidal analgesics (misuse of drug). Marevan & Aspocid lead to many cases of bleeding in cardiac patients & CVS (ICU patients).

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