

Presentation and Management of Perforated Duodenal Ulcer

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Background: Perforated duodenal ulcer is one of the most common causes of abdominal peritonitis. Management of duodenal ulcer had changed after the discovery of H. Pylori and the use of proton pump inhibitors.

Objective: To evaluate the pattern of presentation and mode of management of duodenal ulcer perforations.

Design: A Retrospective Study.

Setting: Surgical Department, Salmaniya Medical Complex, Bahrain.

Methods: All patients with duodenal ulcer perforations seen between 2010 and 2014 were included in the study. The following were documented: personal characteristics, duration of disease, probable risk factors, type of surgery and complications. Data obtained was analyzed using SPSS.

Result: Forty-one patients with perforated peptic ulcer were diagnosed between 2010 and 2014. The mean age was 41 years ranging from 18 to 79 years. Simple closure with omental patch was used.

Conclusion: Middle-aged males were the predominant patients in our perforated peptic ulcer cohort. The majority of the patients do not have known risk factors. Thirty-six (87.8%) patients had peritonitis on examination, and the diagnosis could be confirmed in 30 (73.2%) by finding air under the diaphragm in an erect chest X-ray. Forty (97.5%) perforated duodenal ulcer were repaired by open surgery.