

EMERGENCY CONDITIONS IN SURGERY

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All acute conditions in surgery are clinically presented as acute abdomen. The aim of this study was to identify the most common causes of emergency conditions in surgery.

We included 165 patients operated in the Emergency Centre, Clinical Center Niš for intra-abdominal perforation with a final diagnosis of diffuse peritonitis and bleeding. There were 92 (56%) women and 73 (44%) men.

Appendicular perforation was the cause of peritonitis in 29 (27.9%) patients, gastric perforation in 24 (23.1%) patients, jejunum perforation in 5 (4.8%) patients, and ileum perforation in 7 (6.7%) patients. Large bowel perforation was the cause of peritonitis in 20 (19.2%) patients, rectum perforation in 6 (5.8%) patients and perforation of gall bladder in 13 (12.5%) patients. Gastric ulcer bleeding was found in 24 (39.3%) patients, duodenal ulcer in 18 (29.5%) patients, 11 (18.1%) patients had splenic injury and bleeding, in 5 (8.2%) patients liver bleeding occurred, and in 3 (4.9%) patients, the bleeding was caused by esophageal varices. The overall mortality was 20.6% (n = 34). Due to the consequences of septic condition (SC) 14 (41.2%) patients died, and 20 (58.8%) died of complications of gastrointestinal bleeding (GIB).

The morbidity and mortality rates of emergency conditions are still unacceptably high.

Acta Medica Medianae 2020;59(2):66-71.

Key words: acute abdomen, peritonitis, bleeding