

A Study of Surgical Management of Ileal Perforations and its Outcomes

N Subrahmaneswara Babu

Assistant Professor, Department of General Surgery, Prathima Institute of Medical Sciences, Naganoor, Karimnagar, Telangana State, India

Abstract

Background: Ileal perforations are a common presentation in Surgical clinics with most cases having an etiology of typhoid. The current study aimed to assess the presentation and management of ileal perforation with special reference to typhoid, non-specific and traumatic perforations. The study also aims to assess the outcomes in these patients and the factors affecting prognosis. **Methods:** All the cases suspected of perforated ileum were included in the study. History with special reference to the presence of fever, pain, vomiting, abdominal distension, constipation, and treatment before admission was taken. Vital signs, hydration, abdominal distension, tenderness, guarding, and presence of free fluid were noted. Systemic examination of cardiovascular, respiratory, and central nervous systems was done. All routine blood investigations along with Chest X-Ray, Electrocardiogram, Peritoneal fluid culture, and Pus culture in case of wound infection. In patients wherein, a resection was done the specimen was histopathologically examined. **Results:** Out of n=40 cases included in the study n=23(57.5%) were typhoid perforations and nonspecific perforations were found in n=12(30%) cases, traumatic perforations were found in n=5(12.5%) cases. Most of the patients presented with symptoms and signs of peritonitis. The commonest symptoms were abdominal pain, fever, and vomiting. The commonest signs were abdominal tenderness, guarding, intra-abdominal free fluid, and dehydration. Most patients with typhoid gave a history of fever 12.5 % of patients were in shock. **Conclusion:** Typhoid is the commonest cause of Ileal perforations. The male population is affected most of the time as compared to females. It tends to occur commonly in the second or third decade of life. Traumatic perforations have better outcomes because of healthy bowel conditions. Typhoid perforations have greater morbidity or mortality. The other factors affecting the outcomes are the lag period, increased age, and presence of shock at admission. The type of surgical procedures did not affect the outcome.