

Analysis of Outcomes In Patients Post Non-Oncological Distal Gastrectomy As Definitive Treatment of Gastric Outlet Obstruction Post Perforated Peptic Ulcer Repair In A Single Centre - Malaysia

Ida Arinah M¹, Vincent Chuah J.S¹, Siti Zulaika S¹, C.W Ngo ¹, Nadia Nafasha B¹, Hans Alexander M¹, Rizal Imran A¹, Tuan Nur’ Azmah T.M¹

¹ Department of Surgery, Hospital Sultanah Aminah Johor Bahru, Malaysia

Background

Materials & Methodology

Perforated peptic ulcer(PPU) remains a common surgical emergency.

Gastric outlet obstruction (GOO) post PPU repair is one of the known delayed complications. However, this complication has not been properly reported in literature.

Hence our aim is to share our experience in managing our patients who developed this complication and analyze the surgical outcomes post non-oncological distal gastrectomy to restore alimentary function.

Cross-sectional study of surgical records of all patients who underwent PPU repair from 2017 until 2022 in a Malaysian tertiary referral centre.

Inclusion Criteria
History of development of GOO post-PPU repair diagnosed via OGDS

Exclusion Criteria

- Patients who underwent non-oncological distal gastrectomy for other indications, e.g., bleeding
- No diagnosis of GOO post PPU repair

Discussion and Conclusion

Perforated peptic ulcer repairs are associated with the development of GOO and the complication may manifest anywhere as early as two weeks and as late as 2 years. Thus, monitoring for this complication is advisable.

The morbidity and mortality rates in our centre were 22% and 10% respectively and they were comparable to other studies whereby morbidity ranged from 25-37% and mortality ranged from 16-26%.

Results

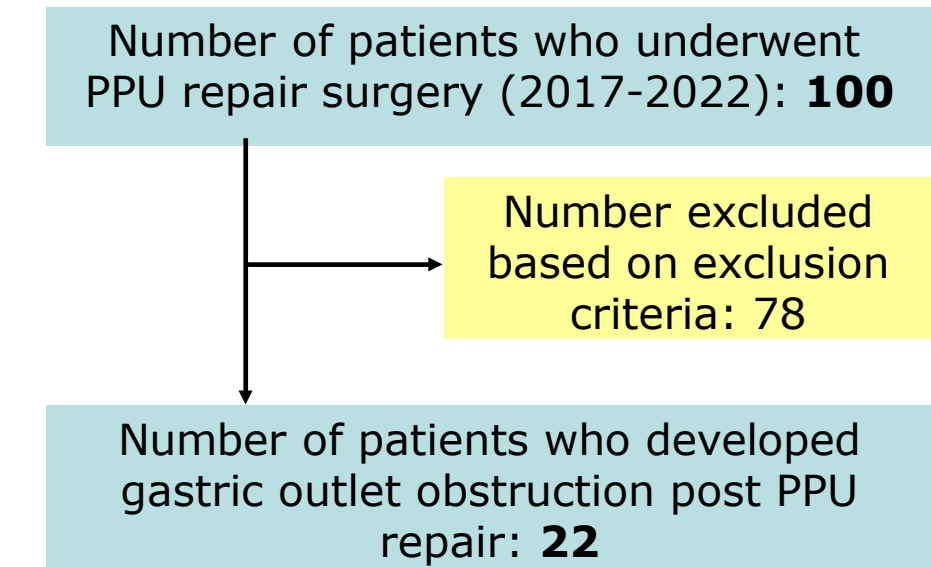


Fig. 1: Distribution of non-oncological distal gastrectomy cases for GOO post PPU repair from 2017 – 2022 (N=22)

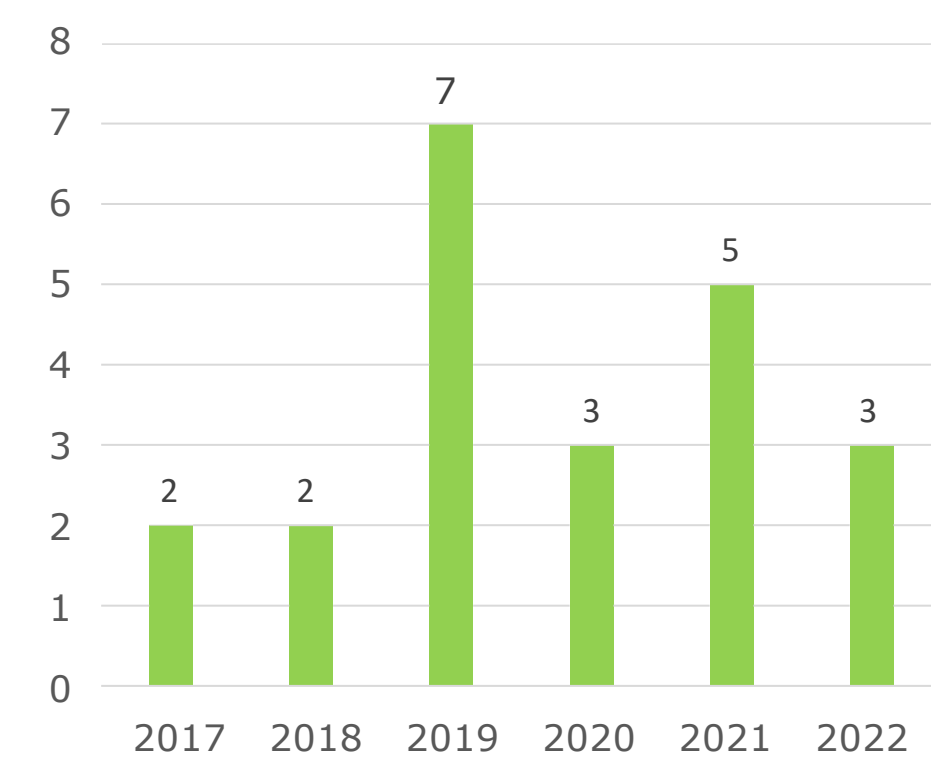


Fig. 2: Time lapsed (in weeks) from date of initial PPU repair until definitive reconstructive surgery

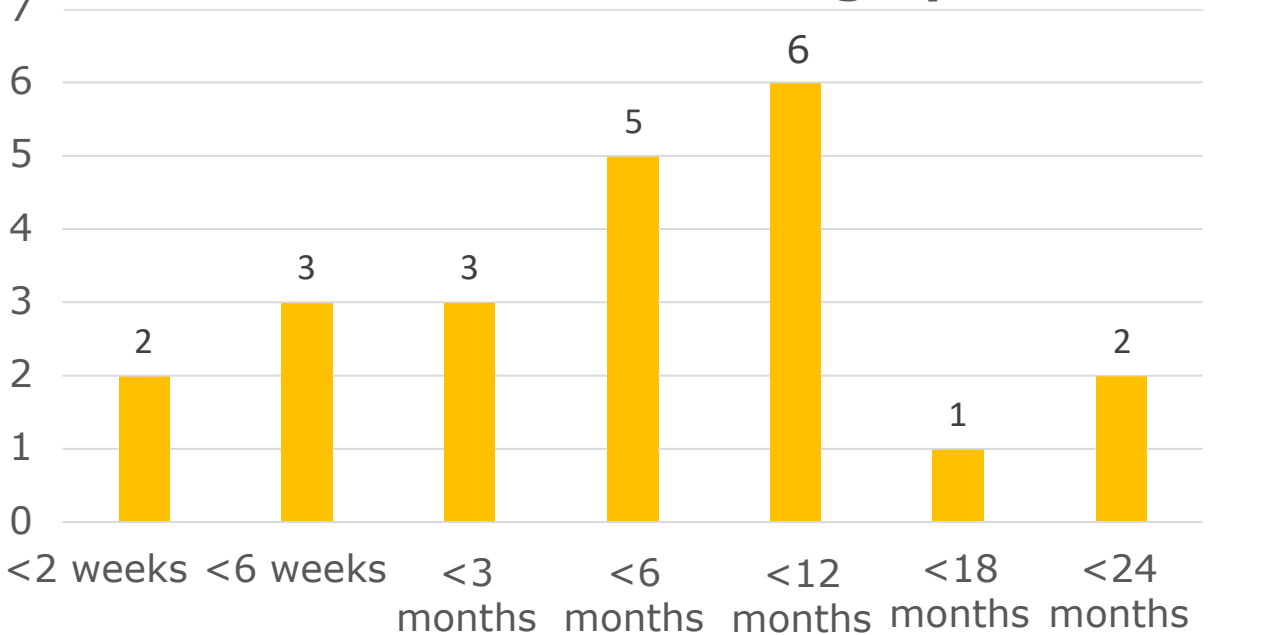


Table 1: 30-day- and 90-day-complication rates post non- oncological distal gastrectomy for GOO post PPU repair

Complications within 30 days	N (%)
No complications	17 (77.3)
Minor: Clavien-Dindo I (SSI)	1 (4.5)
Major: Clavien-Dindo IIIb & above (2 deaths [AMI, VAP], 1 duodenal stump leak, 1 perforated caecum [lymphoma])	4 (18.2)
Complications within 90 days	N (%)
No complications	18 (94.7)
Minor: Clavien-Dindo I (Persistent Fistula - healed at POD 126).	1 (5.3)

References

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