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EMERGENCY MANAGEMENT OF SIGMOID VOLVULUS AT TERTIARY CARE HOSPITAL

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ABSTRACT

OBJECTIVE: *To determine the out come of different procedures in the emergency management of sigmoid volvulus.*
SUBJECTS & METHODS: *Case series study was conducted at Department of Surgery, Chandka Medical College Hospital Larkana from of with 01-10-2007 to 30-04-2010, 32 cases*
Sampling technique: *Non probability purposive.*
INCLUSION CRITERIA:
All patients with intestinal obstruction diagnosed as sigmoid volvulus, operated were included.
EXCLUSION CRITERIA:
- *Patients with other causes of intestinal obstruction.*
- *Patients not consented for study*
- *Patients not visited for follow up*

DATA ANALYSIS: *Data was entered on specific designed proforma and analyzed by SPSS version 13.*
RESULTS: *A total no of 32 patients admitted through emergency department, finally diagnosed as volvulus of sigmoid colon were included in this study. Mean age was 51.83 years +/- 10.13.Male to female ratio was 5.4:1. Main Clinical features were abdominal pain, distention and constipation. All patients were operated by midline incision. Gut was viable in 8 patients while non viable in remaining 24 patients. Operative procedures performed were tube decompression and sigmoidopexy, resection and Primary anastomosis with covering stoma, Hartmann's procedure and Paul mikulicz procedures. Mean duration of procedure was 71.25 minute +/- 10.24*
26 (81%) patients were discharged on 5th POD. Wound infection was present in 5(15.6%), RTI in 3(9%), paralytic ileus in 3(9%), Mean hospital stay was 6.75 days+/- 3.12.
In 6 month follow up the recurrence observed in 3 (37.5%) patients in whom sigmoidopexy was done.
CONCLUSION:
- *In volvulus of sigmoid colon resection and primary anastomosis with covering stoma is safest procedure.*
- *While operating on toxic patients Hartmann or Paul mikulicz can be alternative life saving procedure.*
- *Due to high recurrence rate after sigmoidopexy, resection should be basic principle in volvulus management.*

KEY WORDS: Sigmoid volvulus, acute large bowel obstruction, Resection and primary anastomosis with covering stoma,

INTRODUCTION:

Volvulus is defined as axial rotation of gut around its mesentery. Volvulus can occur in sigmoid, caecum, small bowel and rarely in stomach. Sigmoid colon is most common site among them.[1]

Acute sigmoid volvulus is a well recognized cause of acute large bowel obstruction, particularly in elderly and in patients with debilitating conditions.[2,3]

Sigmoid volvulus is the 3rd most common cause of colonic obstruction in United States after cancer and diverticulitis. Etiological factors include the anatomical variation, chronic constipation, neurological disease and megacolon.[4]

Clinical presentation is of large bowel obstruction, which may initially be intermittent, followed by passage of large quantity of flatus and faeces. Other features include abdominal