

INDICATIONS OF LAPAROTOMY AND SUBSEQUENT MANAGEMENT IN THE PRESENCE OF SKILLED SURGEONS IN A RURAL AND LIMITED RESOURCE SETTING: A 3 Years Experience In Ruhengeri Referral Hospital, Rwanda.

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ABSTRACT: Background: Laparotomy is a major, high risk intervention commonly done for therapeutic and/or diagnostic purpose. Most of patients with abdominal surgical conditions do not get timely access to surgery due to paucity of skilled surgeons at district hospital. This lead to increased number of patients with unmet need for surgery and its associated morbidity and mortality especially in hard to reach areas.

Objective: To identify indications of laparotomy and subsequent management in the presence of skilled surgeons in a rural and limited setting Hospital.

Methods: This is a 3 years retrospective study done in Ruhengeri referral hospital on patients who underwent laparotomy in the department of surgery from September 2016 to August 2019 when two general surgeons were permanently present in the Hospital. The age, sex, diagnosis and initial management have been analyzed and surgical interventions performed

Results and discussion: In this study 232 patients underwent laparotomy for various reasons. The vast majority were between between 21 and 30 years(35%) and above 65years (12.9%), most of them were men (M:F:2:1)., the common indication of surgery was small bowel obstruction (22,2%), followed by followed by hollow viscus perforation (Gastroduodenal and ileal perforation) at 21% and sigmoid volvulus (15,3%). The most common intervention done was Ileal resection + Primary end to end anastomosis (E TEA) at 22,% followed by sigmoidectomy and primary E TEA at 17.7% , then Perforation repair + wash out at 12,9 % and Appendectomy at 9% then others

Conclusion: This study depicts the burden of surgical abdominal conditions in remote areas and proves that major emergency interventions can be done even in rural Hospitals if infrastructures and qualified human resources are available.

Biography:-

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