

Surgical Encounters In Emergency Gynaecological Procedures At Khairpur Medical College

Fozia Unar¹, Abdul Malik Sangri², Zahoor Hussain Bheelar³, Zulfiqar Ali Shar⁴, Bushra Noor Khuhro⁵, Kulsoom Azad Lashari⁶.

1.Dr. Fozia Unar (Senior Registrar,
Department of Obse and Gynae
Lady willingdon Hospital, Khairpur
Medical College Khairpur Mirs Sindh
Pakistan

Email: drfoziaunar@gmail.com

2.Abdul Malik Sangri
Associate Professor
Surgical Department
Khairpur Medical College Khairpur
Mir's Sindh Pakistan

Email: abdulmaliksangri@gmail.com

3.Zahoor Hussain Bheelar
Assitant Professor
Surgical Department
Khairpur Medical College Khairpur
mirs Sindh Pakistan

Email: zahoor@yahoo.com

4.Dr: zulfiqar Ali shar
Assistant professor of surgery
Khairpur Medical college
Khairpurmirs

5.Dr: Bushra Noor khuhro
Assitant Professor
Department of Gynae and Obse
Khairpur Medical college Khairpur
Mirs Sindh Pakistan

Email : b.khuhro@gmail.com

6.Dr. kulsoom Azad Lashari
Professor of Department of Gynae and
Obse Khairpur Medical college
Khairpur Mirs sindh Pakistan

Email: bhattikulsoom.17@gmail.com

Correspondence :

Fozia Unar (Senior Registrar,
Department of Obs:and Gynae Lady
willingdon Hospital, Khairpur Medical
College Khairpur mirs Sindh Pakistan
Adress: Ghreeb shah Road Mohalla
serae Bugan khairpur mirs sindh
Pakistan. Email:

drfoziaunar@gmail.com

ABSTRACT:

Objective; To determine the frequency surgical encounters in emergency gynecological procedures at Khairpur Medical College.

Methods: This was a descriptive case series study that was carried out at Khairpur medical college during 01-07-2019 to 31-12-2019. In this study all the females of age 20 to 70 years presenting with any gynaecological emergency were included. The cases with all obstetrical issues and those with any associated medical disorders were excluded from this study. The cases were managed with resident doctors under the supervision of consultant gynaecologist and the types of surgical emergencies were noted.

Results: In this study there were total 135 emergency cases presented. The mean age of the participants was 47.81±11.46 years and mean BMI was 24.17±3.03 kg/m². The most commonly encountered emergency was ovarian cyst rupture seen in 34 (25.18%) of the cases followed by appendicitis seen in 24 (17.77%), gut adhesion in 23 (17.03%) and ectopic pregnancy in 20 (14.81%) of the cases.

Conclusion; The most commonly encountered emergency at Khairpur teaching hospital is ovarian cyst rupture.

Key words. Gynaecological, Emergency, ovarian cyst, ectopic pregnancy.

How to cite this article: Unar F¹, Sangri AM², Bheelar ZH³, Shar ZA⁴, Khuhro BN⁵, Lashari KA⁶. **Surgical Encounters In Emergency Gynaecological Procedures At Khairpur Medical College.**

JPUMHS:2020;10(02)119-121.

<http://doi.org/10.46536/jpumhs/2020/10.02.302>

INTRODUCTION

Gynaecological complications are frequently encountered in the emergency settings and can be misleading sometimes due to overlapping of the symptoms and the assessment on the basis of history and examination. Usually they are not that fatal except few. However, misleading diagnosis or unnecessary delays can put the risk of fatal complications.¹⁻²

The most common clinical findings in the emergency settings are abdominal pain, vomiting, fever, diarrhoea, hypotension or syncope; but all of these are non specific hence detailed history and careful examination might guide toward certain disease. Yet further investigations are required to reach definite diagnosis. The

most common features point towards acute abdomen in about 10% of the cases associated with any gynecological cause. The frequency of gynaecological related diseases in acute emergency range form 4-35% of the cases.^{1,3}

The studies even from the far past have shown this incidence as around 9.6% of the cases.³ Even with the advancement in diagnostic techniques in the recent decades the incidence of these gynaecological encounters in surgical practice still remains high. Studies have shown that almost 28% of the females diagnosed clinically as appendicitis have an underlying gynaecological pathology.⁴ The most commonly encountered pathologies include ovarian cyst rupture, torsion of adenexa, mittle-schmerz, endometriosis, fibroids,

pelvic inflammatory disease and iatrogenic uterine perforations.⁵⁻⁶ Such cases if not timely managed can result in significant morbidity and mortality.⁷

OBJECTIVE;

To determine the frequency surgical encounters in emergency gynaecological procedures at Khairpur Medical College.

METHODS: This was a descriptive case series study that was carried out at Khairpur medical college during 01-07-2019 to 31-12-2019. In this study all the females of age 20 to 70 years presenting with any gynaecological emergency were included. The cases with all obstetrical issues and those with any associated medical disorders were excluded from this study. The cases were managed with resident doctors under the supervision of consultant gynaecologist and the types of surgical emergencies were noted.

Statistical analysis;

The data was entered and analysed by using SPSS 24.0. Mean and standard deviations were calculated for quantitative variables and frequency and percentages for qualitative variables.

Results;

In this study there were total 135 emergency cases presented. The mean age of the participants was 47.81 ± 11.46 years and mean BMI was 24.17 ± 3.03 kg/m² (table I). Out of these 95 (70.37%) belonged to rural family and 86 (63.70%) were uneducated as in table II. The most commonly encountered emergency was ovarian cyst rupture seen in 34 (25.18%) of the cases followed by appendicitis seen in 24 (17.77%), gut adhesion in 23 (17.03%) and ectopic pregnancy in 20 (14.81%) of the cases as in table III.

Table I. study demographics (n= 135)

Variables	Mean \pm SD	Range
Age	47.81 \pm 11.46	20-70
BMI	24.17 \pm 3.03	18-32
WBC count	8300 \pm 1200	4500-26300
Duration of symptoms (hrs)	3.41 \pm 1.17	1-4

Table II. Categorical variables of study (n= 135)

Variables	No.	%
Rural	95	70.37%
Urban	40	29.63%
Educated	49	36.30%
Uneducated	86	63.70%
Married	118	87.41%
Unmarried	17	12.59%

Table III. Types of emergency encounters (n= 135)

Type of emergency	No.	%
Ovarian cyst rupture	34	25.18%
Appendicitis	24	17.77%
Gut adhesions with uterus	23	17.03%
Ectopic pregnancy	20	14.81%
Perineal tear	18	13.33%
Gut perforation	13	9.62%
Urinary tract injury	3	2.22%

Discussion;

Gynaecological surgical encounters are not uncommon and are being frequently dealt at emergencies of general surgery. Because of the overlapping of clinical feature, they can mimic with various other diseases and need urgent diagnosis to proceed for further management. According to the data of a Pakistani study from Lahore, it was noted that 79 patients presented, during the 6 months of their analysis in surgical cases suffering from gynaecological diseases.⁷⁻⁸

In the present study the mean age of the subjects was 47.81±11.46 years. This was slightly higher as compared to previous one where major this was seen in the range of 25- 34 years. But this can be due to difference in the inclusion criteria. The data from another Pakistani study shown that mean age was around 30 years.⁸

In the present study 87.41% cases were married and this was similar to the findings of the study done by Pokharel et al when they also found this finding in around 90% of the patients presenting with gynaecological emergencies were married.⁹

In the present study the most commonly encountered emergency was ovarian cyst rupture seen in 34 (25.18%) of the cases followed by appendicitis seen in 24 (17.77%), gut adhesion in 23 (17.03%) and ectopic pregnancy in 20 (14.81%) of the cases. the data regarding the prevalence of these entities was slightly variable in previous studies, however the most common emergency were more or less the same. In a study done by Ateeq et al, they observed similar most common complication but it was followed by gut perforation.¹⁰ Similar was supported by another study. And they found a good number of cases i.e. around 20% of them suffering from ileal perforation, ovarian cyst rupture or torsion and gut adhesion each.¹¹

Study by Unal et al., showed that gut adhesions was the most common gynaecological pathology causing acute surgical abdomen.¹² Stewart et al., has reported ectopic pregnancy to be the most common gynaecological surgical emergency.¹³

Conclusion

The most commonly encountered emergency at Khairpur teaching hospital is ovarian cyst rupture.

References;

1. Asif M, Almas D and Hashmi JS. Acute Abdomen: Causes. *Professional Med J* 2008; 15:120-124.
2. McConkey S J. Case series of acute abdominal surgery in rural Sierra Leone. *World J Surg* 2002; 26(4):509-513.
3. Aho AJ, Grönroos M, Punnonen R, Linna M and Antila LE. Abdominal gynaecological emergencies in the surgical unit. *Ann ChirGynaecol* 1979;68(2):47-51.
4. Navaratnam A, Balogun-Lynch J and Roberts P. Emergency department diagnosis of women presenting with lower abdominal pain: Appendicitis or gynaecological? *Int J Surg* 2012;10(8):S49.
5. Bottomley C and Bourne T. (2009). Diagnosis and management of ovarian cyst accidents. *Best Pract Res ClinObstetGynaecol* 2009 Oct;23(5):711-24.
6. van Randen A, Laméris W, van Es HW, van Heesewijk HP, van Ramshorst B, Ten Hove W, Bouma WH, van Leeuwen MS, van Keulen EM, Bossuyt PM, Stoker J, Boermeester MA; OPTIMA Study Group. A comparison of the accuracy of ultrasound and computed tomography in common diagnoses causing acute abdominal pain. *EurRadiol* 2011 Jul;21(7):1535- 45.
7. Hall J, Kaye A, Fallis S, Barsoum G and Youssef H. Outcomes for surgical female patients admitted to a surgical assessment unit with right iliac fossa pain- Is it time for a multidisciplinary approach? *Int J Surg* 2012;10(8):S49.
8. Ali S and Shah STA. Gynaecological Emergencies. *Professional Med J*. 2007;14(1):43-9.
9. Pokharel HP, Dahal P, Rai R and Budhathoki S. Surgical emergencies in obstetrics and gynaecology in a tertiary care hospital. *JNMA J Nepal Med Assoc* 2013 Jan-Mar;52(189):213-6.
10. Ateeq M. and Jehan S. Gynaecological Acute Abdomen. *JRMC* 2012;16(1):48-50.
11. Kattof FM and Jabbo NS. Gynecological emergencies in the general surgery unit. *JBMS* 2006;6:56-58.
12. Unal A, Sayharman SE, Ozel L, Unal E, Aka N, Titiz I and Kose G. Acute abdomen in pregnancy requiring surgical management: a 20-case series. *Eur J ObstetGynecolReprod Biol*. 2011 Nov;159(1):87-90.
13. Stewart B, Khanduri P, McCord C, OheneYeboah M, Uranues S, Vega Rivera F and Mock C. Global disease burden of conditions requiring emergency surgery. *Br J Surg* 2014 Jan;101(1):e9-22.