

CLINICAL STUDY

The Non Surgical Management of Colonoscopic Perforations: Worthwhile To Take Risk?

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Abstract

Background

Colonoscopic procedures account for a substantial number of endoscopies performed for various reasons. Colonic perforations inflicted during colonoscopy pose a challenge to the surgeons in the wake of difficult emergency decisions and major colonic operations.

Patients and Methods

Over a period of three years, a group of patients was referred from the Gastroenterology Unit, emergency room, and/or medical units to the Surgical on call team for the management of suspected colonoscopically induced colonic perforations. Following their transfer, the patients were closely monitored in the surgical unit and treatment was initiated by bowel rest, IV antibiotics and fluids, and analgesia. Patients' response to this regime was meticulously scrutinized to analyze the final outcome.

Results

38 cases were incorporated in this series. Out of these, 35 were urgently operated due to various surgical indications and the remaining 3 cases were managed conservatively. These patients made an uneventful recovery.

Conclusion

In selected patients, the colonoscopic perforations leading to localized fecal peritonitis can be managed expectantly which can avoid moderate to major magnitude emergency colonic operations.

Keywords: Colonoscopy, colonoscopic perforation, colonic repair

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