

EFFICACY OF SURGICAL TREATMENT FOR MECHANICAL JAUNDICE CAUSED BY CHRONIC DIFFUSE LIVER DISEASES

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Abstract

The aim of the study was to increase the effectiveness of surgical treatment for mechanical shock caused by chronic diffuse liver diseases.

Introduction

Materials and methods The study was based on the analysis of the course of obstructive jaundice in 74 patients. The main group consisted of 40 patients with obstructive jaundice on the background of VH. The control group included 34 patients without concomitant VH. To assess the prognosis of the disease, clinical data (timing of jaundice, presence and nature of concomitant diseases, age) were analyzed. software product "Statistica5.5". The critical level of significance in testing statistical hypotheses is $p < 0.05$.

Results and discussion The patients of the study groups were comparable by sex and age. Thus, in the study group there were 21 men (52.5%), women — 19 (47.5%), ($p > 0.05$). The mean age of the patients in the study group was (60.1+10.5) years, and in the control group - (60.8+10.7) ($p > 0.05$). in both groups, it belonged to the age ranges of 45-59 and 60-74 years or, according to the WHO classification, to middle-aged and elderly people. The study of the epidemiology of VH in patients with obstructive jaundice revealed that the overwhelming majority of patients in the study group suffered from VH B (67.5%), while in 30 (75%) cases patients were admitted with a previously established diagnosis. In 10 (25%) cases, hepatitis was detected for the first time. In the course of the study, for the convenience of analyzing the results obtained, we used the classification of biliary obstruction levels proposed by E.I. Galperin et al. the incidence of low localization of tumor strictures in both groups (74.5% in the study group and 80.3% in the control group, at $p > 0.05$). The duration of mechanical jaundice in the patients of the study group was statistically significantly longer than the duration of obstructive jaundice in the control group and were: in the study group, the median corresponded to day 7 (the 25th percentile was equal to day 3; the 75th percentile was equal to day 14), in the control group, it was less and amounted to 5 days (the 25th percentile was equal to 3 days; the 75th percentile was 7 days) ($p < 0.05$). By the time of surgery, the terms of breast cancer among the patients of the study group were as follows: median 18 days. (25th percentile 12.5 days; 75th percentile 28.5 days). In the control group, the median was 12 days. (25th quartile 10 days; 75th quartile 16 days) ($p < 0.05$). Later terms of surgical treatment in the study group were associated with difficulties in the differential diagnosis of jaundice in patients with concomitant pathology (obstructive jaundice and VH). darkening of urine, clarification of fecal masses) in the study group was: the median was 8 days (the 25th percentile was equal to the 3rd day; the 75th percentile was 14 days); in the control group, the median was equal to 3 days (the 25th percentile was equal to the 3rd day;



the 75th percentile was 14 days). ($p < 0.05$). At the same time, the earliest manifestations of the disease in patients of the study group were signs of astheno-vegetative syndrome (28 cases in patients of the study group and 15 cases among patients of the control group, at $p < 0.05$).

Conclusion

Thus, the course of malignant obstructive jaundice against the background of concomitant diffuse liver diseases has clinical features and is characterized by more frequent complications.

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