Upper Gastro-Intestinal Endoscopy in Port-Harcourt: An Audit

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BACKGROUND
Accurate diagnosis of disease conditions using laboratory, imaging or endoscopic investigation is essential for appropriate treatment. Direct visualization of the gastro-intestinal (GI) tract by endoscopy additionally offers the benefit of biopsy and therapeutic options. An audit of our early experience with oesophagogastroduodenoscopy (OGD) is necessary to improve the quality of patient care and outcome.

AIMS
To review the pattern of presentation and endoscopic findings of symptomatic upper gastro-intestinal disease conditions.

PATIENTS AND METHOD
All consecutive patients presenting to the endoscopy unit of a private hospital from February 2012 to July 2013 were prospectively studied. The socio-demographics, indications, endoscopic findings and histopathology report for biopsies were collated. Data was statistical analyzed using SPSS version 20.

RESULTS
There were 30 OGDs in 25 patients performed during the study period. Fifteen were males and 10 females, a M: F ratio of 3:2 and age range from 17-81 years (mean 44yrs SD 14.7). The indications included: epigastric pain (40%), dyspepsia (23%) and dysphagia (14%). Antral gastritis (21%) was the most common endoscopic findings and while more than one pathology was seen in 5 (17%) cases.

CONCLUSION
Peptic ulcer is not the most common cause of epigastric pain. Antral gastritis and multiple non-ulcer pathologies are the more common conditions seen on OGD. This emphasizes the need for thorough endoscopic investigation in symptomatic upper GI disease.

Keywords: Upper gastro-intestinal tract; Endoscopy; Audit.

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