

## Role of Upper GI Endoscopy in Early Detection of Malignancy in Dyspeptic Patients

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### Abstract:

**Background:** Dyspepsia is a common complaint in surgical practice. Dyspepsia is a symptom complex, characterized by nausea, bloating sensation, epigastric pain or discomfort, indigestion and heartburn. Alarming features include Age >50years with new onset of symptoms, Family history of malignancy, Unintended weight loss, Gastro intestinal bleeding, Iron deficiency anaemia, Progressive dysphagia. Dyspepsia associated with alarming symptoms is thought to be associated with serious gastrointestinal disease such as underlying malignancy or significant pathology like stricture or ulcer.

**Patients and methods:** A prospective study was conducted over 100 patients presenting with dyspepsia to general surgery OPD, GGH, Rangaraya medical college, Kakinada, over a period of 2 years from June 2017 to May 2019. All 100 patients were taken a detailed history. A thorough clinical examination was followed by upper GI endoscopy. Biopsies were taken from suspicious lesions. Findings were noted and correlated with alarming symptoms.

**Results:** In my study, alarming symptoms were present in 22 cases out of 100. There were 73 male patients and 27 female. Maximum of these were in the age group 25 to 45 years. Endoscopy was normal in 28 patients. Abnormal endoscopic findings were seen in 72 patients. Most common abnormal finding was gastritis.

**Conclusion:** Dyspepsia is a common symptom of upper gastrointestinal disorder. Upper GI endoscopy is a useful diagnostic modality to identify the specific pathology in patients with dyspepsia. Abnormal endoscopic findings were found in majority (72%), the most common abnormal finding was gastritis. And malignancy was seen in 6 cases. Dyspepsia with alarming symptoms increases risk of malignancy. Upper GI endoscopy is a useful diagnostic modality in elucidation of the causes of dyspepsia and early diagnosis of carcinoma.

**Key words:** dyspepsia, upper GI endoscopy, alarming symptoms.

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### I. Introduction

Dyspepsia is a common complaint in surgical practice. Dyspepsia is a symptom complex, characterized by nausea, bloating sensation, epigastric pain or discomfort, indigestion and heartburn. Alarming features include Age >50years with new onset of symptoms, Family history of malignancy, Unintended weight loss, Gastro intestinal bleeding, Iron deficiency anaemia, Progressive dysphagia. Dyspepsia associated with alarming symptoms is thought to be associated with serious gastrointestinal disease such as underlying malignancy or significant pathology like stricture or ulcer.

#### Aims and objectives

- To study the profile of upper gastrointestinal endoscopy in dyspeptic patients.
- The correlation of alarming symptoms with endoscopy findings.

#### Patients and methods

A prospective study was conducted over 100 patients presenting with dyspepsia to general surgery OPD, GGH, Kakinada, over a period of 2 years from June 2017 to May 2019.

#### Inclusion criteria:

1. All patients presenting with dyspepsia, who underwent upper GI endoscopy.
2. Patients who are willing to participate in the study.
3. Age >18years
4. Previously diagnosed and treated cases of gastric ulcer, duodenal ulcer, presenting with dyspepsia.

**Exclusion criteria:**

1. Patients who are not willing to participate in the study.
2. Age < 18 years.
3. Patients with chronic liver disease.

**Study details:**

All 100 patients were taken a detailed history. A thorough clinical examination was followed by upper GI endoscopy. Biopsies were taken from suspicious lesions. Findings were noted and correlated with alarming symptoms.

**II. Results**

In my study, alarming symptoms were present in 22 cases out of 100.

- There were 73 male patients and 27 female.
- Maximum of these were in the age group 25 to 45 years.
- Endoscopy was normal in 28 patients.
- Abnormal endoscopic findings were seen in 72 patients. Most common abnormal finding was gastritis.

UGI endoscopy finding	No of patients
Normal	28
Gastritis	32
Esophagitis	18
Duodenitis	10
Duodenal ulcer	6
Malignant-6	Growths-4 Ulcers-2

- Dyspepsia with alarming symptoms is associated with increased risk of malignancy.

	Total no of patients	Malignant cases	Incidence of malignancy
Dyspepsia with alarming symptoms	22	5	22.7%
Dyspepsia without alarming symptoms	78	1	1.2%

**Comparison with similar studies**

S.N.	STUDY	YEAR	MOST COMMON FINDING	NORMAL FINDINGS	INCIDENCE OF MALIGNANCY
1	Ziauddin et al	2003	Gastritis 18%	23%	4%
2.	Nowshad khan et al	2007	Esophagitis 12%	25%	3%
3.	Present study	2019	Gastritis 32%	28%	6%

**III. Discussion**

- The Rome 3 criteria defined dyspepsia as one or more of the symptoms such as postprandial fullness, early satiety, epigastric pain or discomfort or burning sensation, lasting for atleast 4 weeks.
- Initial evaluation should focus on identification and treatment of potential causes of symptoms such as gastro esophageal reflux disease, peptic ulcer disease, gastritis but also on recognizing those at risk for malignancy.
- Endoscopy is recommended as the first investigation in the work up of a patient with dyspeptic symptoms and is essential in the classification of the patient's condition as organic or functional dyspepsia.
- In the present study, male preponderance is noted, which is most probably attributed to increased consumption of alcohol, smoking and tobacco chewing which play a key role in pathogenesis of dyspepsia.
- In our study, we observed malignancy in 6 cases, of which 5 were found in patients of dyspepsia with alarming symptoms and 1 was found in patients of dyspepsia without alarming symptoms.

**IV. Conclusion**

- Dyspepsia is a common symptom of upper gastrointestinal disorder. Upper GI endoscopy is a useful diagnostic modality to identify the specific pathology in patients with dyspepsia.
- Abnormal endoscopic findings were found in majority (72%), the most common abnormal finding was gastritis. And malignancy was seen in 6 cases.
- Dyspepsia with alarming symptoms increases risk of malignancy.

- Upper GI endoscopy is a useful diagnostic modality in elucidation of the causes of dyspepsia and early diagnosis of carcinoma.

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