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Neonatal colonic perforation: a case series

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Abstract

Background and Study Aims

Patients and Methods

Results

Conclusion

Key Words Full Text PDF Corresponding Author Despite recent improvement in neonatal management, gastrointestinal perforation during the neonatal period is still a major problem for paediatric surgeons, due to the diversity of its causes, delicate patients and dilemma in management. This study analyzed the clinical findings as well as management of 20 neonates with colonic perforation.

Medical records of neonates from age 1 to 30 days with colon perforation in consecutive 3 years were reviewed. All reviewed patients underwent emergency laparotomy with evidence of peritonitis or pneumoperitoneum. The postoperative data included surgical morbidity, indications for further surgery and mortality.

The study population consisted of twenty patient (14 males and 6 females). The mean age at perforation was 10.78 days. Primary repair of perforation with simple closure and debridement was initiated in seven patients. Thirteen patients underwent primary stoma formation which was closed later on. There were three (15%) postoperative mortalities.

Prompt diagnosis and early vigorous management are mandatory for neonatal colonic perforation. In absence of intestinal obstruction, debridement and primary closure of the perforation are safe provided that the perforation is localized, the remaining intestine is healthy. Otherwise, a stoma has to be formed.

Neonates, colonic perforation.

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