

**A RETROSPECTIVE AND PROSPECTIVE TUDY OF
ENDOSCOPIC MANAGEMENT OF ESOPHAGEAL
DYSPHAGIA AT ENDOSCOPY UNIT.
CAIRO UNIVERSITY HOSPITALS**

Thesis

*Submitted for Partial Fulfillment of Master Degree
in Tropical Medicine*

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Summary

The aim of this work is to study the effect of different regimens for eradication of H pylori, sensitivity and resistance of the used antibiotics and correlate the results with the clinical, and laboratory findings in our patients before and after treatment.

The study was performed on 217 patients presenting with upper GIT symptoms, attending to Gastrointestinal Endoscopy unit and the Endemic Medicine Department outpatient clinic in Fayoum University Hospital, Fayoum University from the period of June 2009 till December 2011. Patients were diagnosed to have H pylori by positive rapid urease test. They were classified into 7 groups based on culture and sensitivity for therapy against H. pylori.

The age of the studied patients ranged between 18 to 77 years old with a mean age of 39.5 years. One hundred sixteen patients (53.5%) were males, and 101 patients (46.5%) were females. Heart burn and epigastric pain were the most common presentations in the studied patients; presented in 52.5% of the patients (111 patients) followed by vomiting in 37 patients (17.1%) while hematemesis and melena were in 24 patients (11%)

Antral gastritis and pan gastritis were the most common findings (58.5%) and (39.2%) respectively followed by duodenitis (30.8%) and GERD (27.2%). However, gastric ulcer was found only in 1.8% of the patients and duodenal ulcers (1.4%).

Rapid urease test was used as screening test to diagnose H. pylori infection followed by histopathology examination of endoscopic biopsies. The resistance to Amoxicillin was 10.6%, clarithromycin 14.3%, metronidazole 47% and levofloxacin 12.4% in the studied patients.

Regarding compliance, it was fairly good; patients were adherent to their medications in 188 patients (86.6 %). In current study, side effects to treatment metallic taste was detected in 27 patients and diarrhea in 23 of the whole studied patients. Diarrhea was reported mainly in the amoxicillin based group therapy and metallic taste in the tinidazole containing therapy.

Concerning the triple therapy, similar eradication rates were reported between the 7-days and 14-days treatment regimens whatever the drug based regimen used (amoxicillin or tinidazole based) with no statistical significant difference. The use of probiotic decreases the incidence of development of side effects and no effect on the rate of treatment response. The eradication rate in the sequential therapy was 90 % one month follow up after treatment, and 83.3% after 6 months follow up. good response rate was reported in the Levofloxacin based therapy .

Baseline complete blood picture was done before starting eradication therapy and 6 months after eradication therapy. Hemoglobin level and MCV were increased in the entire study groups . The platelets count did not show any significant statistical changes in the different patients groups.