

Duodenum Injury in Blunt Abdominal Trauma, Incidence and Management

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Abstract:

Background and aim: Blunt abdominal trauma is hard to diagnose specially after accidents and is associated with high risk mandating quick diagnosis and management. The aim to determine the frequency of duodenal injury in blunt abdominal trauma.

Method: Various surgical procedures, and its post-surgery problems we conducted a retrospective study on 447 individuals who visited the emergency room complaining of blunt abdominal pain and analyzed them for causes and complications.

Results: The primary cause of trauma was traffic accidents, out of the 447 patients, 8.7% had duodenal injuries along with other injuries. The most effective diagnostic technique for stable patients in the diagnosis of duodenal injury was computed tomography (CT) with IV or oral contrast. The most frequently impacted site in the duodenum was in the second portion (41%), whereas the least affected site was in the fourth section (7.7%). The majority of injuries are of category II (53.8%), whilst those of grade IV and V are the least common. There were no solitary duodenal injuries among the linked injuries, which were primarily numerous (38.5%), with the pancreatic and colon being the least common.

Conclusion: It is challenging to determine if there is an isolated injury from nonspecific signs and symptoms in clinical examination, the most frequently occurring injury associated with duodenum is multiple organ injury, and the most effective treatment for duodenum injury in grades 2, 3, and 4 is repair with three-tube decompression with a low percentage of post-operative complication.