

Upper Gastrointestinal Tract Endoscopy Indications in Northern Nigeria

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ABSTRACT

Upper gastrointestinal tract endoscopy is one of the commonly performed endoscopic procedures, and has only recently become available in Nigeria.

The indications for upper gastrointestinal tract endoscopy in three health facilities in Northern Nigeria were reviewed. Two hundred and sixty-nine patients were found to have undergone upper gastrointestinal tract endoscopy. Their ages ranged from 12-90 years with a mean of 48.1±16.2 years. There were 46.8% males and 53.2% females. The commonest indication for the procedure was dyspepsia (61.0%), followed by upper gastrointestinal bleeding, gastro-oesophageal reflux disease, gastric cancer, gastric outlet obstruction, acute exacerbation of peptic ulcer disease, dysphagia, epigastric mass, excessive salivation, abdominal pain, anaemia, chronic diarrhoea, haematochezia and persistent vomiting.

Key words: Endoscopy. Upper gastrointestinal tract. Dyspepsia. Nigeria.

Upper Gastrointestinal Tract Endoscopy (UGIE) is one of the commonly performed endoscopic procedures that provides valuable information in patients with upper gastrointestinal (GI) symptoms.¹ It is usually performed on an outpatient basis primarily for diagnostic and/or therapeutic reasons.²

Data on the indications for UGIE is scanty from Nigeria, particularly, from the northern parts. This study was a retrospective one undertaken to review the indications for UGIE in three health facilities located in different regions of Northern Nigeria from July 2006 to December 2007. The endoscopy registers were examined over this period. The biodata and the indications for UGIE were reviewed. The settings of the study were three health facilities in different regions of Northern Nigeria, with recently established UGIE units in ECWA Hospital, Egbe Eytayo Hospital and Maternity Centre, Ilorin, and Federal Medical Centre, Yola, using models Olympus GIF P10, Olympus GIF XQ10 and Fujinon FG-100FP respectively. The data was obtained and entered into a computer, using the SPSS 10 statistical software, for analysis.

A total of 269 patients were found to have undergone UGIE in the health facilities during the period. Their ages

ranged from 12-90 years with mean of 48.1±16.2 years. Thirty-two patients (11.9%) were in the age group of 20-29 years. Forty-five patients (16.7%) were in the age group of 30-39 years. Sixty-three patients (23.4%), 52 patients (19.3%) and 38 patients (14.1%) were in the age groups of 40-49, 50-59 and 60-69 years respectively. One hundred and twenty-six (46.8%) patients were males while 143 (53.2%) were females giving a male to female ratio of 1: 1.1.

One hundred and sixty-four (61%) patients underwent UGIE because of dyspepsia. Forty-one (15.2%) patients because of upper GI tract bleeding, 26 (9.7%) because of gastro-oesophageal reflux disease; 11 (4.1%) because of gastric cancer; 10 (3.7%) because of gastric outlet obstruction; 4 (1.5%) because of acute exacerbation of peptic ulcer disease. Three patients (1.1%) had dysphagia and epigastric mass. Two patients (0.7%) had excessive salivation. One patient (0.4%) had abdominal pain, anaemia, chronic diarrhoea, haematochezia and persistent vomiting (Table I).

Table I: Indications for upper gastrointestinal endoscopy.

Indications	Frequency	Percentage
Dyspepsia	164	61.0
UGI bleed	41	15.2
GORD	26	9.7
Gastric cancer	11	4.1
GOO	10	3.7
Acute PUD	4	1.5
Dysphagia	3	1.1
Epigastric mass	3	1.1
Excessive salivation	2	0.7
Anaemia	1	0.4
Abdominal pain	1	0.4
Chronic diarrhoea	1	0.4
Haematochezia	1	0.4
Persistent vomiting	1	0.4
Total	269	100

Keys: UGI=Upper Gastrointestinal, GORD=Gastro-oesophageal Reflux Disease, GOO=Gastric Outlet Obstruction, PUD=Peptic Ulcer Disease.

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The commonest indication, for which patients were referred for UGIE, in this study was dyspepsia (61.0%). This is similar to the dyspepsia that was the commonest reason in Zaria found by Danbauchi *et al.*³ It is also similar to the dyspepsia found to be the commonest indication for referral for UGIE i.e. 42.1% found in Pakistan in the work of Khurram *et al.*⁴ The differences in the percentages for dyspepsia might be because of the obvious differences in sample size, the average age of the patients studied, the different geographical locations, and period of time under review. Other indications for UGIE found in this study, are in the evaluation of patients with upper GI tract bleed, GORD, gastric cancer, gastric outlet obstruction, acute exacerbation of peptic ulcer disease, dysphagia, epigastric mass, excessive salivation, abdominal pain, anaemia, chronic diarrhoea, haematochezia, and persistent vomiting. These are also some of the indications for the procedure as found by other workers such as Danbauchi *et al.*, Khurram *et al.* and Olokoba *et al.*³⁻⁵

This study shows that the indications for referral for UGIE in the three health facilities in Northern Nigeria are similar to those of other centres in Nigeria and beyond.

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