



Treatment Analysis of Acute Paraproctitis

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Abstract: Purulent inflammatory diseases of the perineum and perineal cage rank first among patients with emergency proctologic pathology. One of the most frequent diseases requiring emergency surgery is acute paraproctitis. It is known that morbidity of paraproctitis makes up about 0,5% of the total population. Patients with chronic paraproctitis make up 0.5-4% of the total number of hospitalized surgical patients and 30-35% among patients with rectal diseases.

Key words: acute paraproctitis, retrorectal, ischiorectal, coloproctology.

Relevance. One of the most frequent diseases in emergency proctology is acute paraproctitis, the incidence of which, according to our data, takes the leading position in the structure of proctologic diseases. Acute paraproctitis is the most complicated form of purulent inflammatory processes. The number of these patients, increase of microbial resistance require development of more effective means of treatment. To date, the diagnosis and treatment of this disease have not been completely solved. It is related to a number of circumstances. The organizational issues of specialized proctological care are not solved: the majority of patients are still operated on in general surgical hospitals; new technical possibilities of diagnostics and treatment of purulent-inflammatory diseases of perineum and pelvic cage spaces appear. It can be argued that this pathology is also socially significant, as the number of patients, many of whom are treated repeatedly and often without proper success, is constantly increasing.

Purpose of the study. Analysis of the results of paraproctitis treatment and determination of optimal therapeutic measures, minimizing postoperative complications in the acute period and chronicity of the process in the remote period.

Material and methods of research. The clinical material was based on data from medical records of 470 patients with acute paraproctitis treated at the Department of Coloproctology, SamMI Clinic No. 1, for the period from 2018 to 2023.

We analyzed the admission of patients to the hospital, the localization of the process, the age and sex composition of patients, anamnestic data, the nature of the treatment performed and the duration of hospital stay. The bacterial spectrum of the isolated microflora was studied. General trends in the incidence and structure of acute paraproctitis were studied.

Results and discussion. During the period under study 470 patients with acute paraproctitis were treated in the coloproctology department. 470 operations were performed. Operative activity for five years amounted to 100%. According to emergency indications 470 operative interventions were performed, which made up 30,5% of the total number of proctologic surgeries. For acute paraproctitis 470 patients were operated upon, which amounted to 15.9% of all emergency operations and 30.5% of all operations during the present period in the department..

The duration of illness before hospitalization and the duration of inpatient treatment are two interrelated indicators. Late admission prolongs the treatment and wound healing time, which is associated with the spread of purulent inflammatory process. The time of illness does not affect the radicality of surgical intervention. Thus, 55 patients were operated on in 2018, which amounted to 11.7% of all operations in the department, in 2019, 2020, 2021 and 2022 respectively 74 (15.7%), 97 (20.8%), 117 (24.8%), 127 (27%). The incidence rate was 0.07% per all residents of Samarkand. Acute paraproctitis in males was diagnosed in 364 cases (77,4%), in females in 106 cases (22,6%). According to our study acute paraproctitis in men is much more frequent than in women. In our opinion, this circumstance can be explained by more frequent consumption of strong alcoholic drinks by men, professional and hygienic factor, anatomical and physiological features of male organism. Among the patients the persons from 18 till 60 years old prevail which made up 67,5%, that permits us to emphasize this disease as a social problem. Patients of adolescent age made up 20,3%, persons of older age group - 12,2%. While studying the localization of the process we found out that purulent focus was located in subcutaneous tissue in 75,5% of cases, in ischiorectal region - in 12,5%, in pelvio-rectal - in 2,5% of cases. Submucosal and retrorectal paraproctitis accounted for 5.5% and 4.0%, respectively. The growth of ischiorectal paraproctitis has been established. Thus, in 2018 there were 12 patients with this form (21.8%), and in 2020 - 29 (24.7%). The majority of patients were referred by polyclinic physicians (87.8%), with 12.2% of patients coming to the emergency department on their own. The number of visits within the first 6 days of the disease onset amounted to 72.5%. There is an increase in the admission of patients in the first three days from the beginning of the disease: in 2018 34 patients were admitted, which was 61.8%, in 2020 - 87 (74.3%). - 87 (74,3%). Late admissions from 7-10 to 11 days or more from the onset of the disease accounted for 20% and 7.5%, respectively. All admitted patients were operated on, and antibiotic therapy was prescribed for the majority (78,5%), (21,5%) patients were not prescribed such therapy, mostly patients with shallow subcutaneous form of acute paraproctitis. Analysis of morbidity over the years shows that the incidence of acute paraproctitis remains stably high from year to year.

When studying the microflora causing acute paraproctitis, we found that the most frequently identified were *E. coli* (68.5%), *E. cloacae* (10.5%), *S. aureus* (8.5%), *K. oxytoca* (6.5%), and *S. epidermidis* (5%).

According to our data, the admission pattern of patients to the proctological hospital remained almost unchanged from year to year. The majority of patients were admitted by referral from a polyclinic (81%), indicating the important role of the polyclinic in diagnosing this pathology at the prehospital stage. It was not possible for patients to go to an outpatient clinic on their own or to go to an outpatient clinic. Other routes of admission accounted for 19%.

Conclusions. The most frequent emergency pathology requiring surgical intervention is acute paraproctitis, which predominantly affects people of working age, with a predominance of men. The main localization is the subcutaneous form of the process. Early referrals accounted for one third of all cases, the majority of patients were admitted to the hospital upon referral from outpatient clinics. Most patients underwent surgical treatment with antibiotic therapy. The main composition of the microflora was represented by *E. coli*, *E. cloacae*, *S. aureus*.

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