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Iatrogenic Duodenal Injuries, Analysis of the Surgical Treatment

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Abstract

Background: When an iatrogenic duodenal injury occurs, it represents one of the biggest challenges in surgery. The objective of this study is to describe and analyze the surgical treatment of iatrogenic duodenal injuries in a Regional Reference Center.

Methods: A retrospective study was conducted from January 2016 to December 2019.

Results: We found nine patients, mainly were male (n=5), in the sixth decade of life. Most of these injuries were secondary to gallbladder and bile duct procedures (n=5). The average time elapsed between injury and repair was seven days (range, 0-16 days). The first part of the duodenum was more affected (n=5). The principle procedures used were primary closure (n=4), and Whipple procedure (n=2). Morbidity was 55%, and mortality 33%. The intestinal fistula was the most frequent morbidity. In the analysis, the correlation of intestinal fistula with surgical bleeding (p=0.036), low proteins (p=0.043), and post-injury repair time (p=0.044) were found significant, as well as the correlation of surgical bleeding with mortality was found significant (p=0.049).

Conclusion: The iatrogenic duodenal injuries have high morbidity and mortality. Different variables, like low proteins, surgical bleeding, and long post-injury repair time can influence negatively their result.

Key words: iatrogenic injuries, duodenum, perforation, surgery, outcomes