521 patients with perforated duodenal ulcer were observed. Ulcers were classified according to their spreading: local (one wall of duodenum, in 403 or 77.4% patients); sectoral (lesion of 2 – 3 wall of duodenum, in 32 or 6.1% patients); circular (in 9 or 1.7% patients) and multiply (in 77 or 14.8% patients).

Penetration was the most frequent complication accompanying with perforation – in 57 (10.9%) patients. It was associated with hemorrhage or stenosis in 22 (4.2%) patients. The frequency of accompanying with perforation complications was depended from spreading and size of ulcer defect. Under local ulcers it revealed in 7.9% observations, sectoral ulcers - 81.3%, multiply ulcers – 26.0%, circular ulcers – 100%.

Local perforated duodenal ulcers accompanied with stenosis (17), penetration (11) and hemorrhage (4). Sectoral perforated duodenal ulcers observed in combinations with penetration and hemorrhage (11) or penetration and stenosis (2). Circular perforated duodenal ulcers associated with stenosis and penetration (5), stenosis and hemorrhage (1), stenosis, penetration and hemorrhage (3).

In 1 patient with multiply ulcers we have observed perforations of two ulcers simultaneously.

Penetration of ulcer of back duodenal wall in pancreas was revealed in 11 patients, hemorrhage from ulcer of back duodenal wall – in 6, stenosis – in 1, penetration of ulcer of back duodenal wall and hemorrhage – in 1.