## EXPERIENCE OF DIAGNOSTICS AND MEDICAL TREATMENT OF ILLNESS DIEULAFOY

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A syndrome Dieulafoy from literary data is the massive arterial bleeding caused by the break of aneurism of small artery under mucous layer of stomach wall. The clinical picture of this syndrome are not practically described. The choice of method of medical treatment remains a difficult problem. Taking into account all afore-mentioned, study of clinical manifestation and possibilities of endoscopic investigation in diagnostics of this disease allows to lower frequency of unknown sources of bleeding and improve his diagnostics. All afore-mentioned is determined by actuality of select theme.

**Aim.** A research purpose is the improvement of results of diagnostics and medical treatment of illness Dieulafoy.

**Methods.** For period with 2006 on 2013 in the surgical department of Sumy regional clinical hospital we looked after 6 patients (4 men and 2 women) with illness Dieulafoy, that made 0,4 % from the common amount of patients, hospitalized concerning the sharp gastro-intestinal bleeding. In the term of to 6 hours from the beginning of disease 4 patients are hospitalized, to 24 hours -2. The state of patients was estimated as middle degree at 2 patients, heavy - in 4. Severity of the state was conditioned by volume of blood loss and concomitant diseases. Age hesitated from 47 to 79 years (middle ages  $51.5 \pm 12.4$  years).

Clinical course of disease was typical. In all patients the symptoms of the gastro-intestinal bleeding are revealed, such as vomiting by a blood or «coffee-dregs», melena, diagnosed posthemorrhagic anaemia of a different degree of severity.

During hospitalization the anamnesis of disease turned out, presence of concomitant pathology, estimation of hemodinamic indexes was conducted, the laboratory examinations were executed, FGDS.

**Results.** During endoscopic investigation an erosive artery was exposed as a crater with the discoloured area of mucous membrane in a center and unchanged in color mucous membrane round it. An ulcer Dieulafoy, by the sizes of to 0.3 cm in a diameter, in 5 cases was located in overhead third of body of stomach on a back wall, in 1 case – in a duodenum.

To two patients, at which in the moment of performing of endoscopic investigation there were no data for bleeding, that proceeds, conservative medical treatment is conducted: infusional-transfusional, hemostatic and antiulcer therapy. In one case, bleeding is stopped by means endoscopic hemostasis. 3 patients are operated. At two patients, incision of acute ulcer is executed with submucosal aneurysm, at one - sewing of wall of stomach to the muscular layer with ligaion of artery, that bleeds. The relapses of bleeding in a postoperative period were not present. Course of postoperative period – without complications. All operated patients discharge from the hospital in satisfactory state.

At pathohistological research of remote areas of mucus vascular dysplasia which showed up a thrombosis and necrosis of wall anomalous winding submucosal artery was revealed. Proliferation and sclerosis of intima was revealed, degeneration of middle layer, disappearance of elastic fibres. Integrity of wall of artery was also broken. Lymphocytic infiltration was revealed in the edges of defect of mucus and adjoining parts of mucous membrane. The signs of vasculitis, atherosclerosis or formed aneurysm were not thus exposed.

From six persons which passed medical treatment concerning illness Dieulafoy died one patient. **Conclusion.** Illness Dieulafoy is the rare reason of the gastro-intestinal bleeding. The break of wall of the extended under mucous artery with development of the massive bleeding lies in the basis of disease. The most frequent localization of ulcer Dieulafoy is overhead third of body of stomach, on a back wall. Fibrogastrodouodenoscopia is the leading method of diagnostics of disease. The repeated endoscopic researches allow to avoid diagnostic mistakes and give skilled medical help. At uneffective of endoscopic haemostasis urgent operation is necessary – gastrotomia, excision of mucus with a vessel, that bleeds or sewing of wall of stomach to the muscle layer with ligation of artery, that bleeds.

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