

CONFERENCE ABSTRACT

Malignant obstructive jaundice; NCI Cairo University study: Review of 232 patients

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ABSTRACT

Background: Obstructive jaundice is a common problem in the medical and surgical gastroenterological practice. Malignant obstructive jaundice can be caused by cancer head of pancreas, periampullary carcinoma, carcinoma of the gall bladder and cholangiocarcinomas.

Objective: To review the etiological spectrum of malignant obstructive jaundice in NCI Cairo university during a period of 3 years (2008 till 2010).

Patients and methods: Retrospective study including 232 patients who presented with malignant obstructive jaundice between (2008 to 2010). Data were collected from the biostatistics and cancer epidemiology department.

Results: Out of 232 patients; 156 (67.2%) were male and 76 (32.8%) were female; the median age of the study population was 49 years (range 19-80 years). Our results indicate that the expression of CXCR4 and mTOR may be poor prognostic biomarkers in DLBCL. The commonest cause of malignant obstructive jaundice was pancreatic head cancer, 72% (167/232), followed by the ampullary carcinoma 15% (36/232). The last cause was cholangiocarcinoma 12.5% (29/233). Regarding the commonest symptom; clay colored stools (98.7%) was more frequent in patients with malignant disease whereas abdominal pain (97.7%) was 2nd common symptom.

Conclusion: Obstructive jaundice is more common among males and cancer head of pancreas is the commonest malignancy. US, ERCP and CT-Scan are important diagnostic modalities for evaluation of patient with obstructive jaundice with ERCP having the additional advantage of being therapeutic as well.

Key Words: Obstructive jaundice, ERCP, Ca head of pancreas, Ca gall bladder

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