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Abnormalities of the small bowel in chronic infective and non-infective diarrhea

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Abstrak

The abnormality or disease of ihe small intestine may cause chronic diarrhea. The tests required to investigate the abnormality of the small intestine are difficult and expensive. In this study we studied the small intestine in chronic diarrhea cases, to discover any abnormality.

The chronic diarrhea patients presenting from 1996 to 2000(5 years) at Cipto Mangunkusumo General Central National Hospital were included in the study. Patients were excluded if unable to co-operate. All of the patients were given blood and stool lexis in addition to colonoscopy, ileoscopy and duodeno-jejunoscopy with biopsy.

Small intestinal examination could only be performed on 78patients witii chronic diarrhea. The most frequent characteristic were: aged 30-39 or 50-59 years (25.6% of all canes in the study), male(57.7%), non-bloody non steatorrhoeic type of diarrhea(74.4%), and 4 to 48 weeks-duration of diarrhea(68.0%). Small intestine abnormalities were endoscopically and/or histopathologically found in 65 cases(S2.6%), while the rest of the patients were found to have normal small intestine. The abnormalities were found to he infective non-tuberculosis ileitis (in 20 patients, or 26% of all cases), Infective non-tuberculosis duodenitis(20 or 26%), non-infective jejtinitixf 14, or 18.2%), villous aft phy of the jejunum(3, or 3.9%), lymphoid nodular/follii hyperplasia of the terminal Heutn(12, or 15.6%) etc. LOT intestinal abnormalities were found in 67 or S3.7% of t chronic diarrhea cases.

The frequent small intestinal abnormalities were infe tive ileitis, duodenitis and lymphoid nodular/follicle hype plasiaofthe terminal ileum. The small intestinal abnormalities were found less than the large intestinal abnormalitie