

*Faculty of Medicine
Ain Shams University*

**COMPARATIVE STUDY ON THE COAGULATIVE AND
BLEEDING PROFILE IN PATIENTS WITH BLEEDING
OESOPHAGEAL VARICES TREATED BY INJECTION
SCLEROTHERAPY VERSUS BAND LIGATION**

Thesis
Submitted in Partial Fulfillment
of Master Degree in
Internal Medicine

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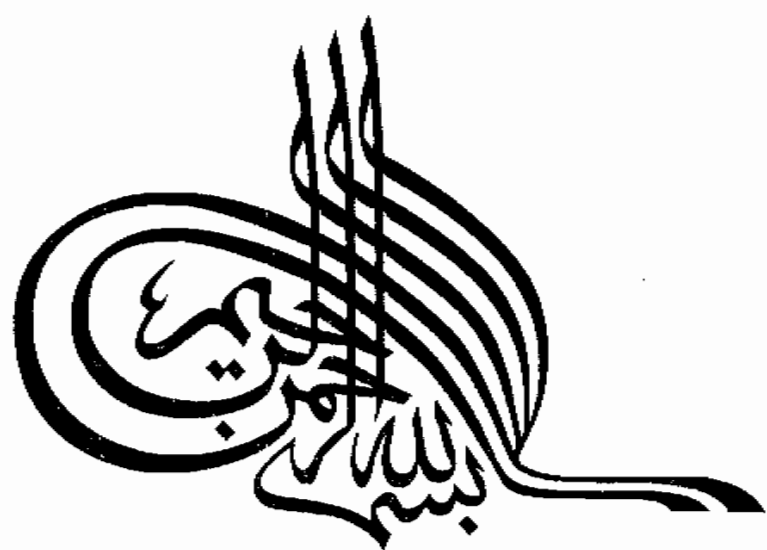
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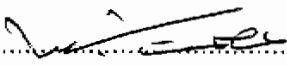
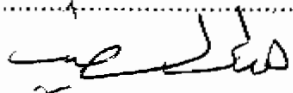






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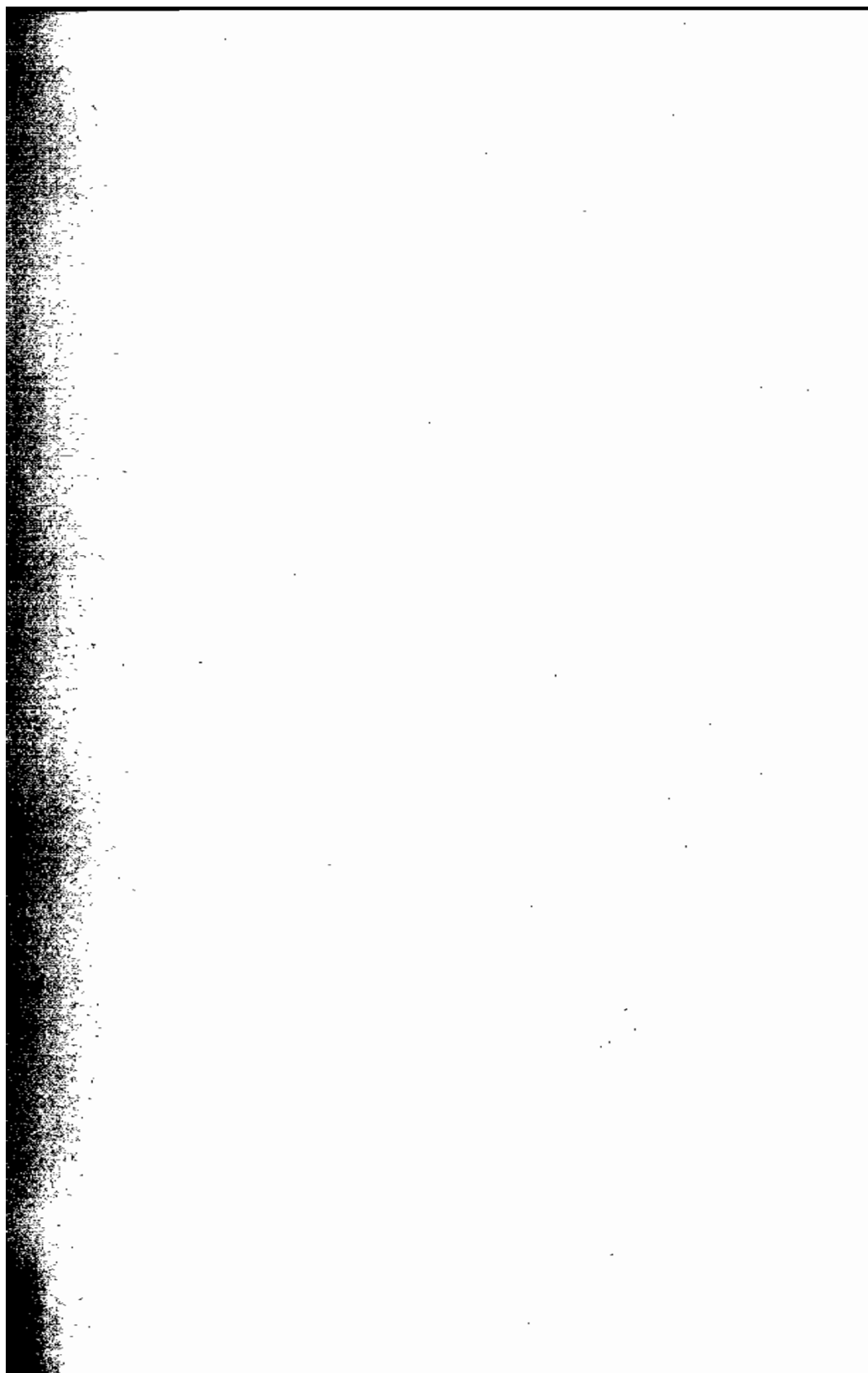


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***INTRODUCTION
AND
AIM OF THE WORK***



INTRODUCTION AND AIM OF THE WORK

Introduction

The liver is the principle site for synthesis of all coagulation proteins with the exception of Von Willebrand Factor and Fibrinolytic proteins. The liver also synthesizes protease inhibitors which modulate the coagulation cascade, such as antithrombin III, protein C and heparin co-factor II. The liver also clears activated clotting factors from the blood.

Impaired coagulation is the major haematological manifestation of liver cirrhosis. The decreased activity of any or all of these factors slows the coagulation process and, in conjunction with thrombocytopenia and various potential bleeding sites, poses a lethal threat to decompensated patients with cirrhosis (Sherlock and Dooley, 1997).

Intravariceal sclerotherapy results in transient activation of the clotting system with mild consumptive coagulopathy probably precipitated by inducing platelet agglutination and by indirect activation of contact clotting factors secondary to endothelial injury (Tang *et al.*, 1986).

Endoscopic injection sclerotherapy did not lead to disseminated intravascular coagulation although transient activation of coagulative and fibrinolytic systems did occur.

(2)

Introduction and Aim of the Work

With a significant decrease in platelet count, and almost complete reversion was noted about 18 hours after endoscopic injection sclerotherapy (**Bernardi *et al.*, 1984**).

Platelet aggregation after intravariceal injection of 5% ethanolamine oleate was significantly suppressed by a humoral response (**Yamaga *et al.*, 1989**).

Aim of the Work

To compare the systemic coagulopathy and bleeding profile following sclerotherapy of oesophageal varices with 5% ethanolamine oleate versus that following band ligation.