سامية محمد مصطفى

شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم

سامية محمد مصطفى

شبكة المعلومات الجامعية

شبكة المعلومات الجامعية

التوثيق الالكتروني والميكروفيلم

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سامية محمد مصطفى

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات

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بالرسالة صفحات لم ترد بالأصل

MEDICAL VERSUS SURGICAL THERAPY IN THE PREVENTION OF RECURRENT BLEEDING OESOPHAGEAL VARICES.

Thesis

Submitted to the Faculty of Medicine

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in Partial Fulfillment of the Requirements of the Degree of

DOCTOR OF INTERNAL MEDICINE

BY

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INTRODUCTION

Portal hypertension

Portal hypertension is a common complication of both acute and chronic liver diseases. It is characterized by an increase in portal venous pressure which stimulates the development of portosystemic collaterals and therefore the passage of part of the portal blood to the systemic circulation producing humoral and haemodynamic alterations.[1]

One of the serious complications of portal hypertension is variceal bleeding. In Egypt Schistosomiasis is the most frequent etiology of liver fibrosis and portal hypertension [2]. The total number of infected individuals in 1990 was estimated to be 5-6 million [3]. Clinically it is presented by heamatemesis from esophageal varices, which is responsible for about two third's of upper gastrointestinal tract bleeding in Egypt [4].

In liver cirrhosis, bleeding from esophageal varices is associated with a high mortality [5-8]. Before emergency endoscopy was available, about 50% of the patients died within the first month [9].and among the survivors, many suffer from one or more recurrent episodes of bleeding [10].