

سامية محمد مصطفى



شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم



سامية محمد مصطفى



شبكة المعلومات الجامعية



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



سامية محمد مصطفى



شبكة المعلومات الجامعية

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



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



سامية محمد مصطفى



شبكة المعلومات الجامعية



بعض الوثائق الأصلية تالفة



سامية محمد مصطفى



شبكة المعلومات الجامعية



بالرسالة صفحات لم ترد بالأصل





**OPERATIVE VERSUS NON OPERATIVE
REDUCTION OF INFANTILE
INTUSSUSCEPTION, COMPARATIVE STUDY**

THESIS

**SUBMITTED FOR PARTIAL FULFILMENT OF
MASTER DEGREE IN GENERAL SURGERY**

**BY
HANY MANSOUR MAHMOUD RAGEH
(M. B. B. ch)**

**SUPERVISED BY
PROF. Dr. MOSTAFA ABD AL-GHAFOUR HASSANIEN
PROFESSOR OF GENERAL SURGERY
FACULTY OF MEDICINE
ASSIUT UNIVERSITY**

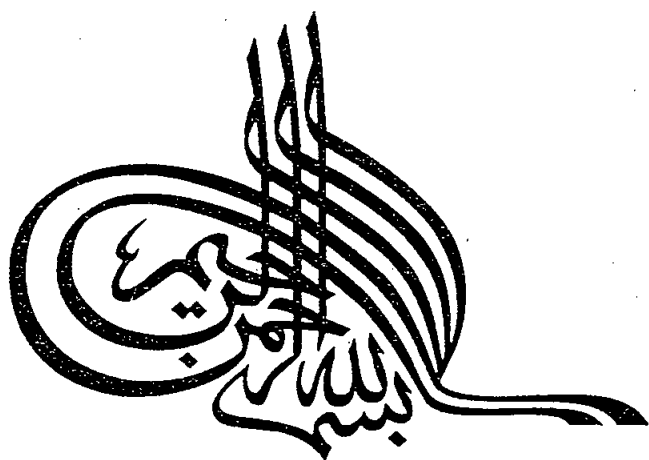
**Dr. ABD EL-KARIM HASAN ABD ALLAH
ASSISTANT PROFESSOR OF RADIOLOGY
FACULTY OF MEDICINE
ASSIUT UNIVERSITY**

**Dr. MOSTAFA THABET AHMAD
LECTURER OF GENERAL SURGERY
FACULTY OF MEDICINE
ASSIUT UNIVERSITY**

2001

B

12509

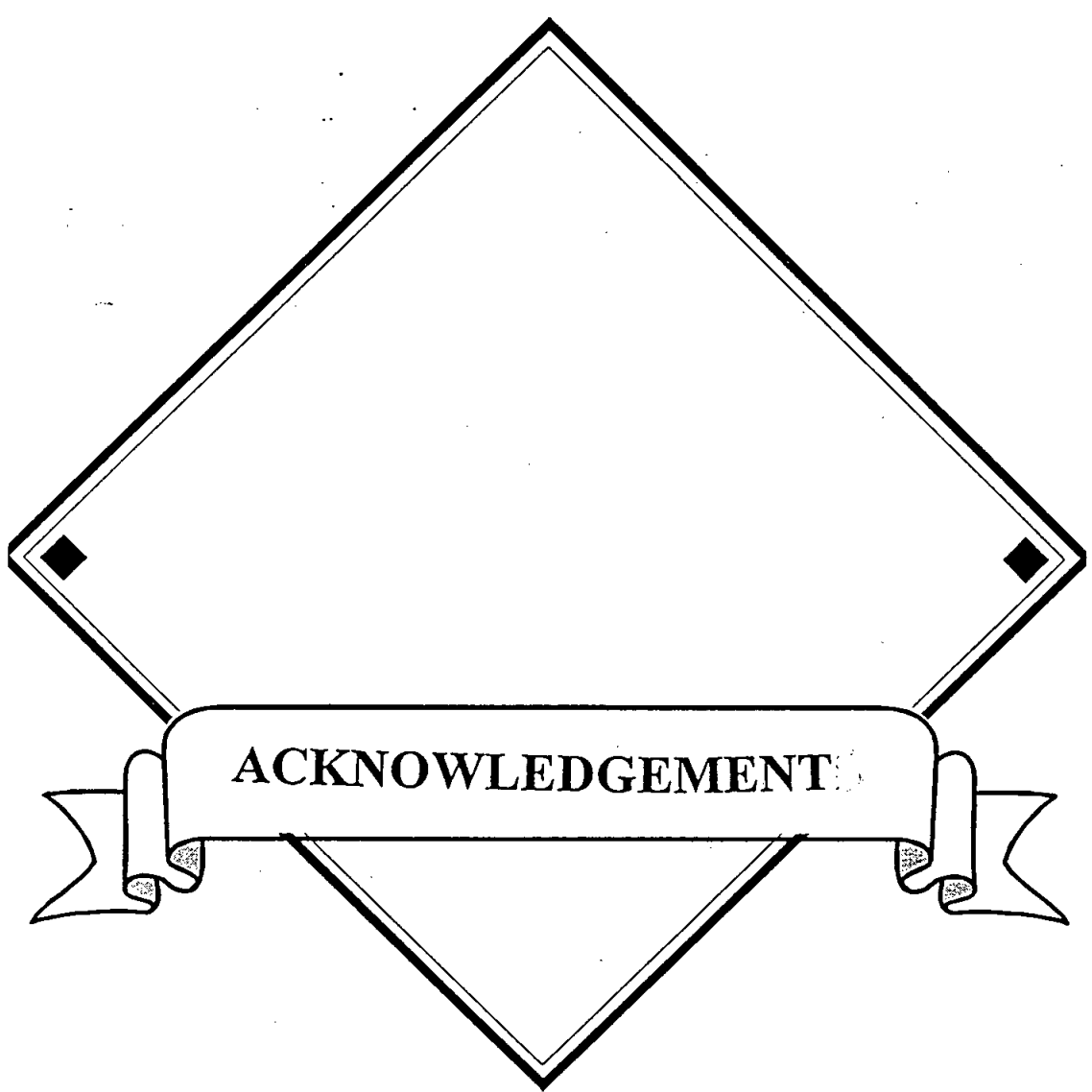


﴿...نَرْفَعُ دَرَجَاتٍ مِّنْ نَّشَأٍ وَفَوْقَ كُلِّ

ذِي عِلْمٍ عَلِيمٌ﴾

سورة يوسف (آية ٧٦)

بِسْمِ اللَّهِ
الرَّحْمَنِ الرَّحِيمِ



ACKNOWLEDGMENT

Praise be to **ALLAH**, the merciful, the compassionate for all the countless gifts have been offered. Of these gifts, those persons who were assigned to give me a precious hand so as to be able to fulfill this study. Some of them will be cordially acknowledged.

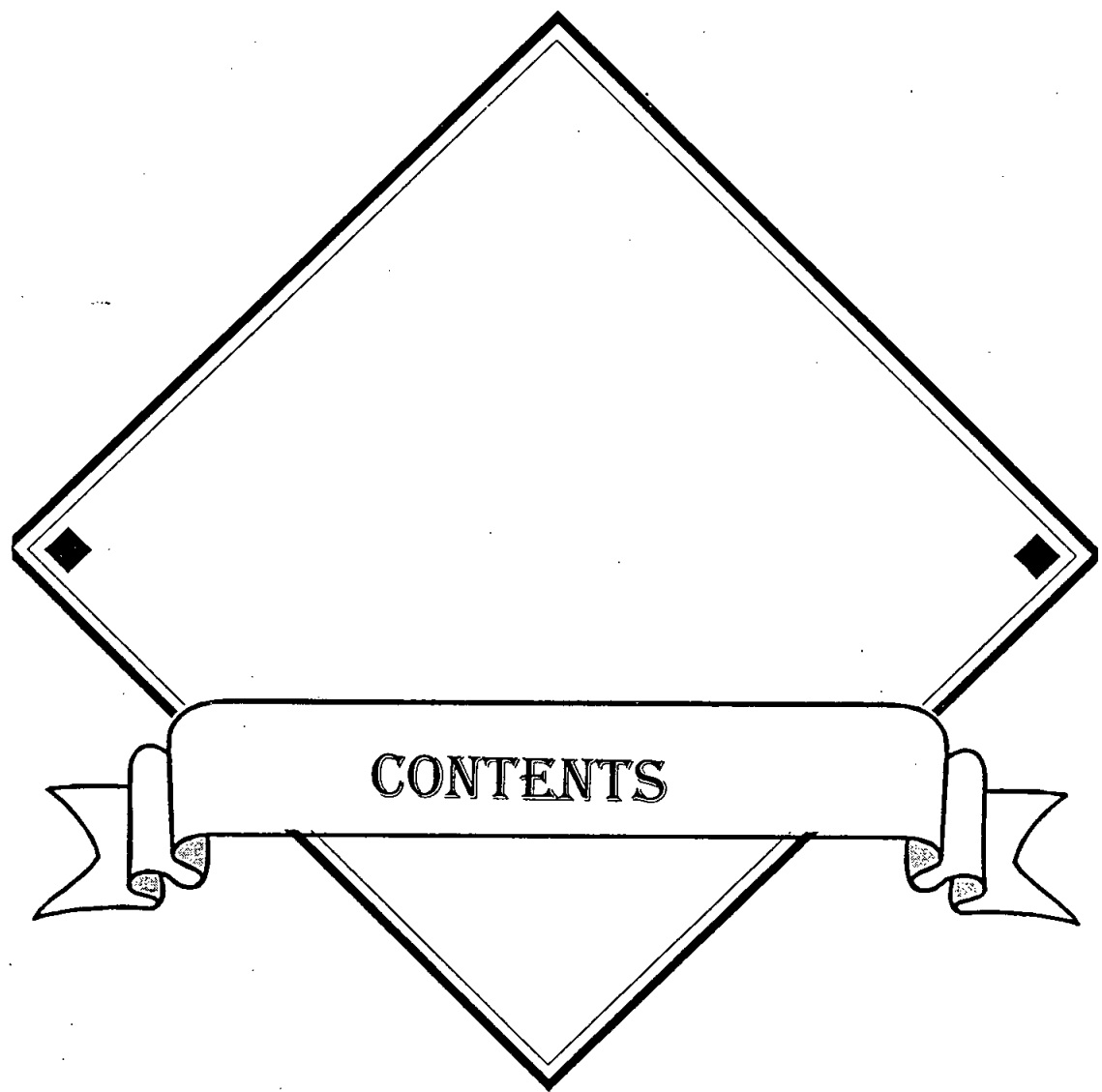
I would like to express my sincere gratitude, deepest acknowledgment and appreciation to my **Prof. Dr. Mostafa Abd El-Ghafour Hassanien**, Professor of General Surgery, Faculty of Medicine, Assiut University, who reviewed my work at every stage of its development and generously offered his cooperation, encouragement, assistance, advice and suggestions for improvement.

I would also like to express my deepest gratitude and appreciation to **Dr. Abd El-Kareem Hasan Abd Allah**, Assistant Professor of Radiology, Faculty of Medicine, Assiut University. I sincerely feel indept for his encouragment and for continuous advice, support and guidance throughout this work. Also I would like to express my sincere gratitude for his continous encouragement and supportive advices.

I wish to express my extreme gratitude to **Dr. Mostafa Thabet Ahmed**, Lecturer of General Surgery, Faculty of Medicine, Assiut University for his sincere directions, keen supervision and outstanding help.

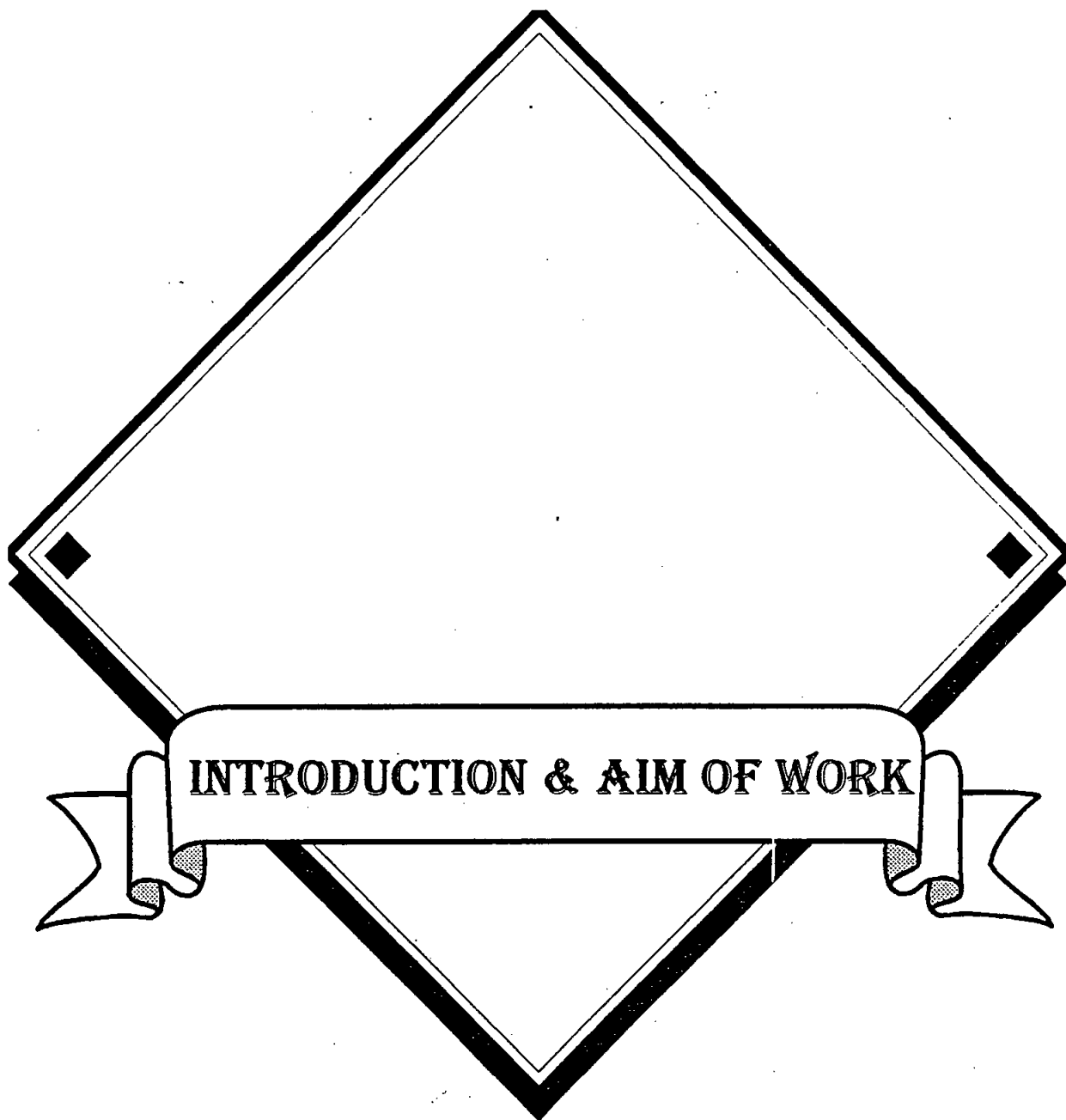
Hany Mansour Mahmoud

2001



CONTENTS

	Page
INTRODUCTION AND AIM OF WORK	1
REVIEW OF LITERATURE	3
- Incidence	3
- Etiology	4
- Diagnosis	6
- Treatment	13
1- Non-operative treatment	16
I- Hydrostatic reduction by barium enema under fluoroscopy	16
II- Pneumatic reduction under fluoroscopy	23
III- Saline enema under sonographic guidance	26
2- Operative treatment	27
PATIENTS AND METHODS	30
RESULTS	36
DISCUSSION	49
SUMMARY AND CONCLUSION	52
REFERENCES	55
ARABIC SUMMARY	--



INTRODUCTION & AIM OF WORK

INTRODUCTION AND AIM OF THE WORK

Intussusception is the invagination of one bowel segment (intussusceptum) into adjacent one (intussusciens) (Winslow, et al., 1996).

It has been differentiated from other forms of intestinal obstruction since Paul Barbette described intestinal invagination in the mid seventeenth century and suggested operative reduction (Rees and Lari, 1976).

In mid-nineteenth century, the disease was almost universally fatal but occasionally responded to inflation of the bowel with bellows or to enema, (Ravitch, 1986).

Hirschsprung introduced the method of controlled hydrostatic reduction in 1876 (William, 1998).

In 1913 Ladd's published the first reproduction of radiograph of contrast enema in intussusception (Marc, et al., 1996).

The first successful operation for intussusception in an infant was performed by Jonathan Huchinson 1871 (William, 1998).

The treatment of idiopathic intussusception of childhood have changed over the last 10 years, (Littlewood and Vogel, 1998).

Aim of the work:

The aim of this work is to evaluate the different methods of non operative management of infantile intussusception as well as to compare them to each other and to the surgical management.

