Effect of hyperbaric oxygen therapy on patients with adhesive intestinal obstruction associated with abdominal surgery who have failed to respond to more than 7 days of conservative treatment.


Source

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Abstract

BACKGROUND/AIMS:
To investigate the effects of hyperbaric oxygen (HBO) therapy on patients with adhesive intestinal obstruction who have failed to respond to more than 7 days of conservative treatment.

METHODOLOGY:

Six hundred eighty-five patients, who were admitted a total of 879 times for adhesive intestinal obstruction, were divided into groups according to the treatment and interval between the first day of the therapy and clinical symptoms of obstruction; tube decompression therapy within 7 days after appearance of clinical symptoms (Group I: n = 321), clinical symptoms that have persisted for less than 7 days before the start of HBO therapy (Group II: n = 498), and for more than 7 days (Group III: n = 60).

RESULTS:

The overall resolution and mortality rates in the cases of adhesive intestinal obstruction were 79.8% and 2.2% in Group I, 85.9% and 1.4% in Group II, and 81.7% and 1.6% in Group III, respectively. Group II had significantly better resolution rates than Group I (odds ratio 1.6, p < 0.02).

CONCLUSIONS:

HBO therapy may be useful in management of adhesive intestinal obstruction associated with abdominal surgery, even in patients who fail to respond to other conservative treatments. HBO therapy may be a preferred option for treatment of patients for whom surgery should be avoided.

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