
INFECTIOUS DISEASES OF SURGICAL IMPORTANCE

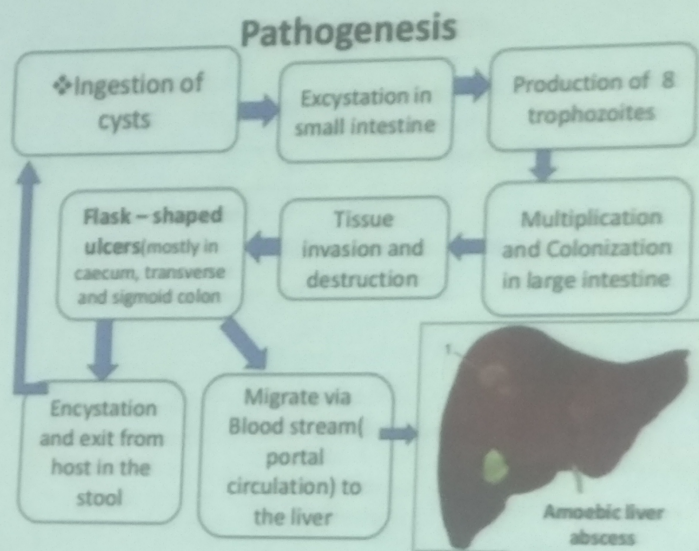
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AMOEBIASIS

INTRODUCTION:

- It is caused by *Entamoeba histolytica*.
- Common in Indian subcontinent, Africa and parts of Central and South America.
- The mode of infection is faeco-oral route
- Amoebic liver abscess- commonest extraintestinal manifestation occurs in less than 10% of the infected population.
- Immunocompromised and alcoholics are more susceptible.

Pathogenesis of amoebic liver abscess



- Patient may present initially with non-specific symptoms but then gradually progress to specific symptoms.

- Right upper abdominal pain
- Hiccoughs
- Non-productive cough.

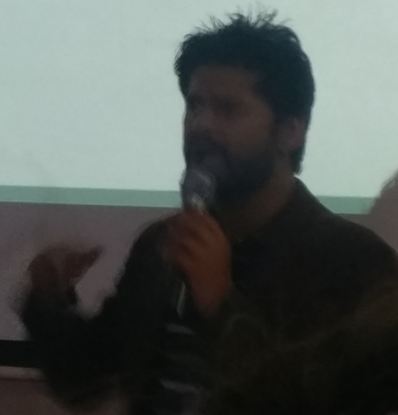
- AMOEBOOMA: Chronic granuloma arising in the large bowel most commonly seen in cecum.

INVESTIGATIONS:

- Baseline investigations.
- Serological tests (complement fixation, IHA, ELISA)
- Sigmoidoscopy shows typical flask shaped ulcers.

IMAGING:

- Ultrasound and CT scans are the methods of choice



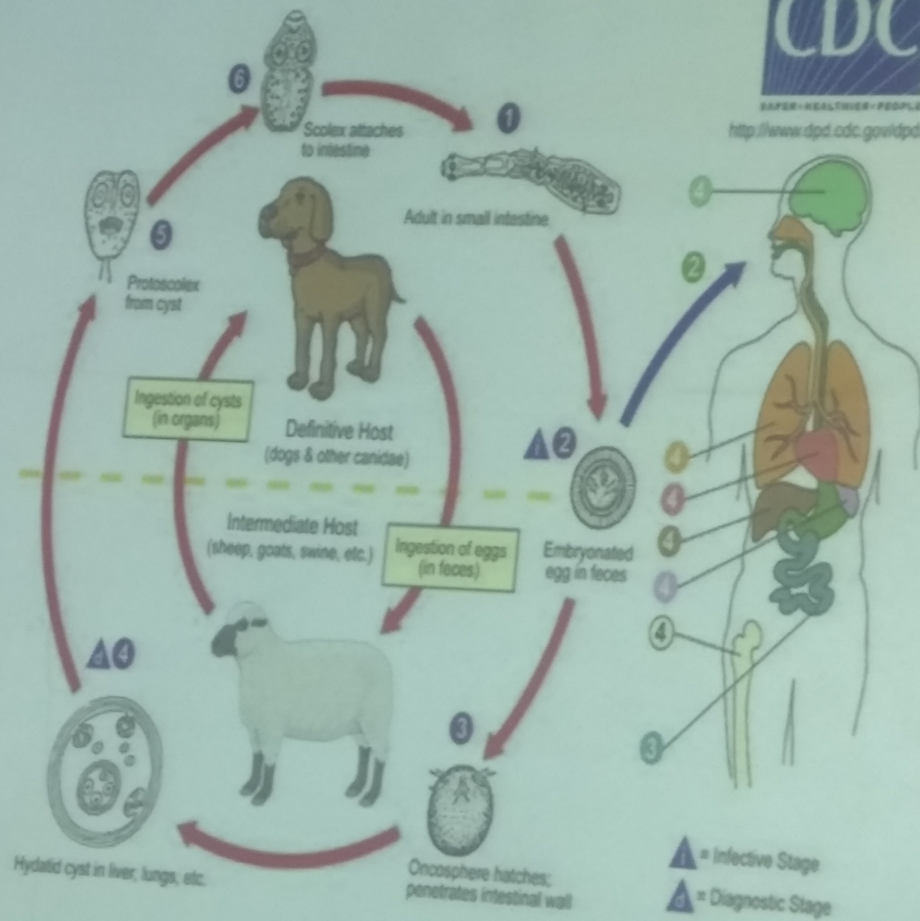
TREATMENT:

- Medical treatment is very effective
- For large abscesses, repeated aspiration is combined with drug treatment.
- Surgical treatment is reserved for complications
- Acute toxic megacolon and severe haemorrhage are surgical emergencies.

HYDATID DISEASE

INTRODUCTION:

- It is caused by *Ecchinococcus granulosus*.
- The disease is globally distributed.
- It may come from a rural sheep farming community.

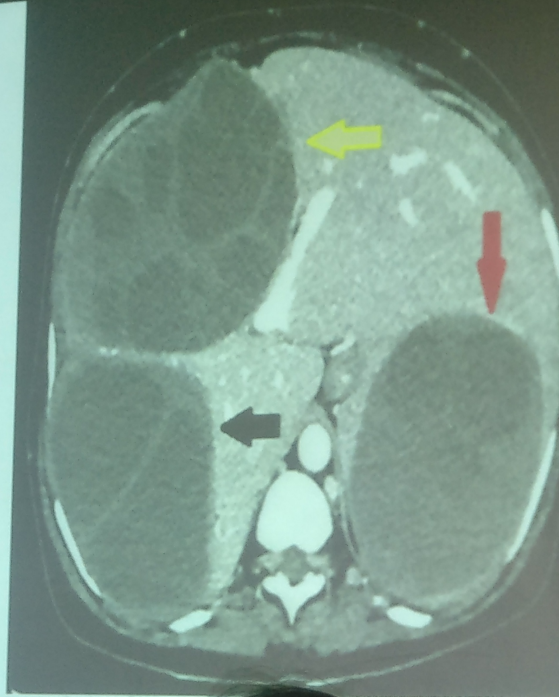


CLINICAL FEATURES:

- The parasite can colonise every organ in the body.
- It may be asymptomatic and discovered coincidentally.
- Symptoms include
 - Dull pain in right hypochondrium
 - Dyspnoea
 - Obstructive jaundice
 - Unexplained headache

INVESTIGATIONS:

- Eosinophil count
- Serological test (ELISA and immunoelectrophoresis)
- Ultrasound
- CT Scan



TREATMENT:

- Ideally managed in a tertiary unit by a multidisciplinary team
- Medical treatment (Albendazole or praziquantel)
- Surgical treatment
 - PAIR
 - Total or partial pericystectomy with omentoplasty
 - Hepatic segmentectomy.