

THE FREQUENCY OF GASTRIC CANCER AMONG PATIENTS PRESENTING WITH GASTRIC OUTLET OBSTRUCTION IN RWANDA.

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Background: Distal gastric cancer presented up to 35 percent of GOO (gastric outlet obstruction). Gastric cancer among patients with GOO in Rwanda is not well studied. Adequate evidence based medicine was needed to address this problem.

The aim of this study was to determine the prevalence and risk factors of gastric cancer among patients presenting with gastric outlet obstruction in Rwanda.

Methods: This study was a prospective observational study. All patients above the age of 15 years presenting to University Teaching Hospitals of Kigali and Butare with a clinical diagnosis of GOO and underwent endoscopy and/or laparotomy were included in the study. Data was collected from April to September 2013 using a structured questionnaire and after obtained Informed consent. Data was collected using Epi data 3.1, Excel and analysed using SPSS 16.

Results: A total of seventy five were studied. Fifty-five participants with complete results were included in analysis. The prevalence of Gastric cancer among GOO was 36 (65.5%) and majority 30 (54.5%) of patients presented with adenocarcinoma. In the multivariate analysis, alcohol consumption was associated with gastric cancer among GOO with (OR= 5.58; 95% CI [1.513-20.573] and p value 0.01). Although use of tobacco was 3 times more likely to cause gastric cancer, it was not statistically significant (OR=3.014; 95% CI [0.73-12.3] and p value 0.125). Others factors such as sex, weight loss were less likely to be associated with gastric cancer. Thirty-seven (67.3%) patients with GOO and 41.8% of Gastric cancers were positive for *Helicobacter pylori*. The mean age was 52.2 years (range 18-77). GOO was slightly more common in males 32 (58.2%) with Male to Female ratio: 1.4:1. The majority of patients 43 (78.2%) were farmers. All patients had epigastric pain and postprandial vomiting.

Conclusion: Gastric cancer is the commonest cause of gastric outlet obstruction in Rwanda. A patient over 52 years with features of GOO and a history of alcohol consumption in Rwanda is most likely having gastric cancer.

