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Research Article

**PATTERN OF VARIOUS DISEASES AMONG THE ADMITTED
PATIENTS IN SURGICAL UNIT OF SERVICES HOSPITAL,
LAHORE**¹Dr Zonish Zahid, ²Dr. Muhammad Ausaf Saleem, ³Dr. Amna Bibi¹King Edward Medical University, ²Basic Health Unit, Sohan, Dina, ³University of Health Sciences.**Article Received:** March 2019**Accepted:** April 2019**Published:** May 2019**Abstract:**

Objective: This research work aimed to determine the pattern of different diseases among the patients getting treatment in the surgical unit of Services Hospital, Lahore.

Study Design: This research work was a retroactive examination of the patients getting treatment in surgical unit from August 2018 to January 2019.

Study Setting: The surgical unit-4 of General Hospital, Lahore was the venue of this research work.

Results: Total five hundred and one patients in which 56.70% (n: 284) were male patients & 43.30% (n: 217) were female patients were the part of this case study. These patients got admission in surgical unit-4 of the General Hospital, Lahore in the duration of those six months. Total 59.10% (n: 296) patients got admission through outpatient departments, 37.90% (n: 190) patients joined from emergency and 3.0% (n: 15) were the patients from other units. Most of the patients i.e. 22.80% (n: 114) found with suffering from the diseases of gastro intestines followed by hernia in 18.80% (n: 94), hepatobiliary disorder present in 13.80% (n: 69) patients, ano-rectal complications in 7.40% (n: 37) patients, abscesses available in 7.0% (n: 35), trauma in 5.60% (n: 28), diseases of thyroid in 4.0% (n: 20) patients, disorders related to testicular and scrotal in 3.70% (n: 19), diseases of breasts in 3.40% (n: 17) & tetanus patients were 2.0% (n: 10). The most common linked diseases which was available in 12.0% (n: 60) patients was diabetes mellitus. Eighty-eight percent patients got rid from their diseases after completion of the treatment and 2.20% (n: 10) died in the duration of this case study.

Conclusion: This research work showed that the most common reason of the admission was the problems associated with the disorders of gastro intestines followed by many other diseases as mentioned above. The most common linked disease was diabetes mellitus.

Key Words: Surgical Unit, Diabetes, Mellitus, Hernia, Tetanus, Complication, Disease, Design, Pattern, Trauma.

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INTRODUCTION:

This very hospital is one of the famous hospitals of Lahore providing treatment to patients in almost all the medical branches. This hospital has affiliation of postgraduate medical institute Lahore. There are total 4 units of surgery in this hospital. The function of all the units is independent. The professional staff of the surgical unit-4 consists of specialists in this field professors to high amount of house officers. Like the other surgical units of the hospital, this unit has one outpatient department day in one week. This is the hospital of tertiary care. It does not only entertain the patients from only Lahore but it also treats the remote areas of whole province Punjab. This research work conducted to determine the pattern of various complications among the patients who were getting treatment in the surgical unit-4.

METHODOLOGY:

This research work is a retroactive study on all the patients getting treatment in Services Hospital,

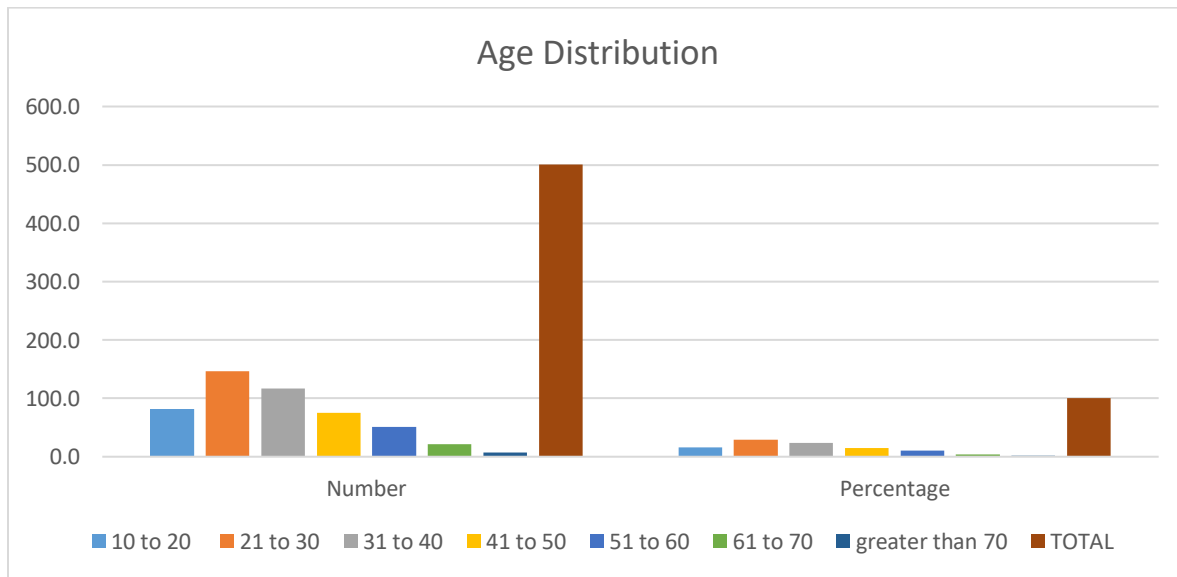
Lahore. This research work was conducted from August 2018 to January 2019. A special organized Performa was in use for the collection of record. The data contained the information about the demography of the patients, final detection of the disease, admission mode, and final findings of the treatment and the availability of the linked diseases. SPSS V.10 was in use for the statistical analysis of the collected information.

RESULTS:

In the duration of six months of this case study, five hundred and one patients got admission in the surgical unit-4, General Hospital, Lahore. There were total 56.70% (n: 284) male and 43.30% (N: 217) female patients. Majority of the patients got admission through outpatient department i.e. 59.10% (n: 296) whereas 37.90% (n: 190) patients were emergency cases and 3% (n: 15) patients were from the other units. The distribution of the age of all the patients is available in Table-1.

Table I: Age Distribution

Age	Number	Percentage
10 to 20	82.0	16.40
21 to 30	147.0	29.30
31 to 40	117.0	23.40
41 to 50	75.0	15.00
51 to 60	51.0	10.20
61 to 70	22.0	4.40
greater than 70	7.0	1.40
TOTAL	501.0	100.00



Total eighty-eight percent patients discharged after full treatment and 2.0% (n: 10) patients died during this period, 7.80% (n: 39) patients got referrals of other departments whereas 2.20% (n: 11) left the treatment in opposition to the advice.

Most of the patients as 22.80% (n: 114) found with diseases of gastro intestines followed by hernia in 18.80% (n: 94) patients, disorders of hepato-biliary in

13.80% (n: 69) patients, problems of ano-rectal in 7.40% (n: 37) patients, abscesses were available in 7.0% (n: 35) patients, trauma issues in 5.60% (n: 28), diseases of thyroid in 4.0% (n: 20), problems associated with testicular & scrotal in 3.70% (n: 19), diseases of breast in 3.40% (n: 17) and tetanus issues in 2.0% (n: 10) as available in Table-2 & Table-3.

Table II: Disease Pattern

Disease	Number	Percentage
Gastrointestinal related	114.0	22.80
Hernia	94.0	18.80
Hepato-biliary region	69	13.80
Ano-rectal region	37.0	7.40
Abscess	35.0	7.00
Trauma	28.0	5.60
Thyroid related	20.0	4.00
Testicular & scrotal	19.0	3.70
Breast related	17.0	3.40
Tetanus	10.0	2.00
Miscellaneous	58.0	11.50
TOTAL	501.0	100.00

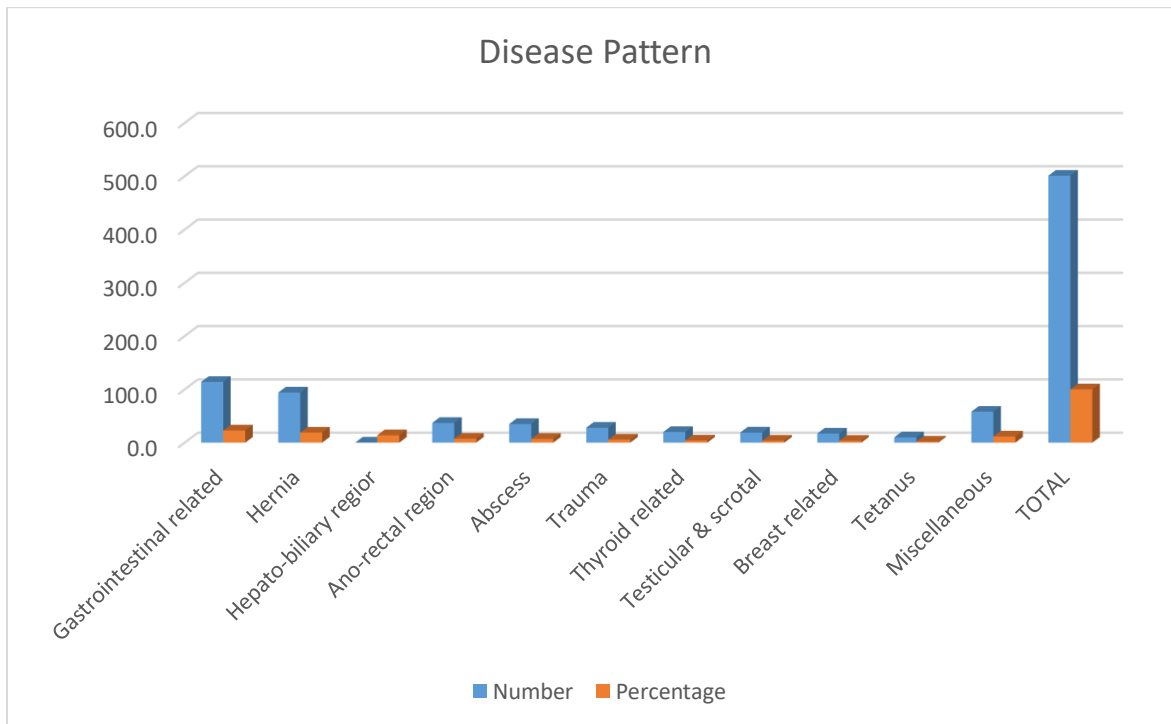
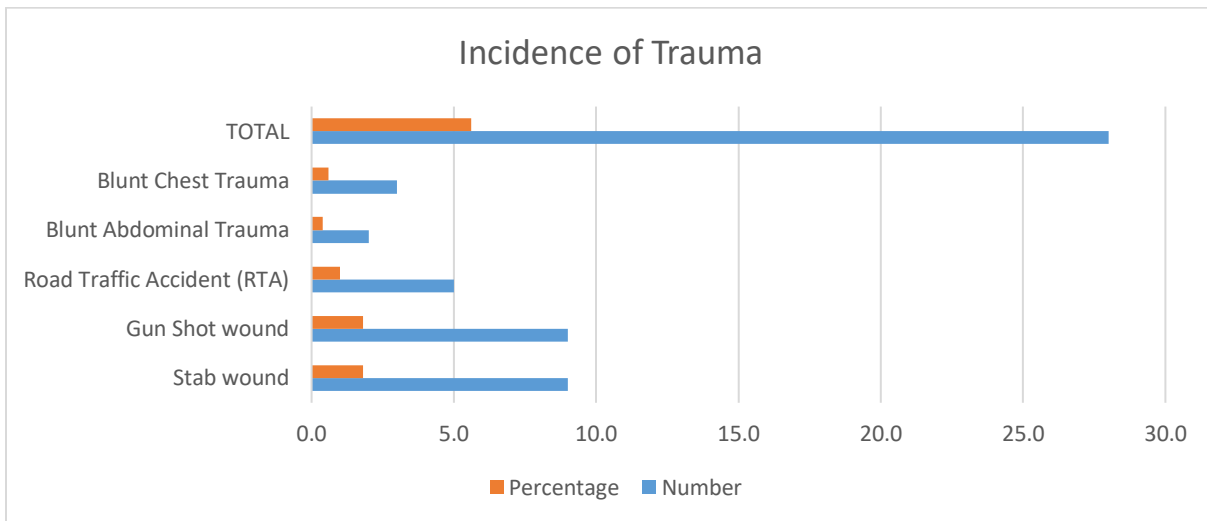


Table III: Incidence of Trauma

Condition	Number	Percentage
Stab wound	9.0	1.80
Gun Shot wound	9.0	1.80
Road Traffic Accident (RTA)	5.0	1.00
Blunt Abdominal Trauma	2.0	0.40
Blunt Chest Trauma	3.0	0.60
TOTAL	28.0	5.60

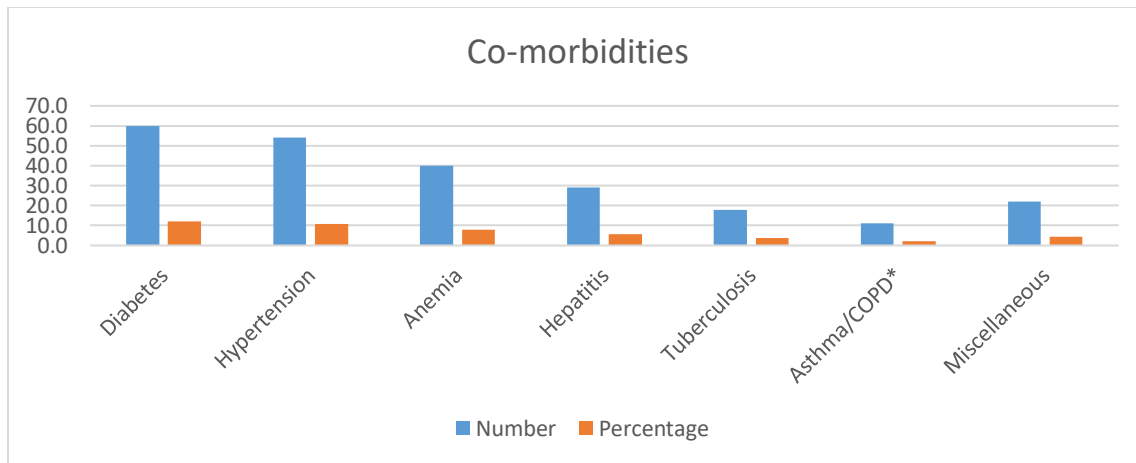


In accordance with the related diseases, 12.0% (n: 60) patients were suffering from diabetes mellitus and 10.80% (n: 54) patients were the victims of hypertension whereas anemia was available in 7.90% (n: 40) patients as described in Table-4.

Table IV: Co-Morbidity

Associated Disease	Number	Percentage
Diabetes	60.0	12.00
Hypertension	54.0	10.80
Anemia	40.0	7.90
Hepatitis	29.0	5.80
Tuberculosis	18.0	3.60
Asthma/COPD*	11.0	2.20
Miscellaneous	22.0	4.40

* Chronic Obstructive Pulmonary Disease



DISCUSSION:

Diseases pattern changes with geographical regions, among various races, people of different ages, social condition and among people with different professions. Genetic as well as factors of environment are also responsible for change in the disease pattern. There is very less amount of case studies available on this particular subject. Only 2 research work described the diseases pattern in medical wards [1, 2], one case study from surgical unit [3] whereas one study in the surgical ward presented only overview [4]. There is a clear disparity in this case work and case work conducted in other surgical unit [3]. There were 501 patients who got admission in this research work in 6 months in comparison with the 563 patients who got admission in complete one year as stated by [3], which contained only the patients of urology and surgical patients of pediatric ward. This showed the high work burden of General Hospital, Lahore. The most important reason of the patient's admission were the diseases of gastro intestines as 22.80% whereas Shaikh [3] stated hernia (16.0%) as the important reason of the patient's admission.

Manzar [4] reported the diseases of the genitourinary as the most common reason (29.0%) & diseases of gastro intestines as the second most common cause of patient's admission. The prevalence of the burst appendix was available in four patients in this research work, though data elaborates 20.0% patients with the swollen and painful appendix to have perforation form at the time of their appearance [5]. We saw the obstruction in intestines in 3.40% (n: 17) patients of this case study. The prevalence of the pattern of diseases changes with geographical areas and ethnicity. The greatest prevalence of the diseases is available in peoples of Chile, American Indians & various areas of India where it is responsible for 9.10%

diseases of biliary tract [7]. The carcinoma of breast is the main cause of mortality among the females of the countries of West having middle age. One million new patients of this disease detected in 1998 in the whole world. Case work also concluded that in UK and Wales, one female out of twelve is the victim of this disease [8]. Jaffrey in his study conducted in Pakistan have concluded the cancer of breasts as the most frequent tumor among females living in Sindh [9].

In current case work, we found only 1% (n: 5) patients suffering from the cancer of breasts. The most common reason of mortality and disability are injury & trauma in 1st forty years of life. This is even true for the areas with high occurrence of the AIDS. In this research work, 5.60% (n: 28) patients who got admission found with the previous trauma history, containing 3.60% (n: 18) patients of stab & wounds of gunfire. The most frequent linked diseases in the patients of this case study were diabetes mellitus (12.0%) & hypertension (10.80%). The occurrence of diabetes mellitus in accordance with many other research works varies from 5.0% to 15.0%. A research work carried out by Shera displayed the incidence of diabetes mellitus as 16.20% in males and 11.70% in females [10].

A case work carried out in the city of Bahawalpur according to the standard of World Health Organization displayed the overall occurrence of diabetes mellitus to be 5.40% [11]. In accordance with the national survey of health in 1998 there were 12 million people suffering from hypertension in our country Pakistan. Eighteen percent population having the age of more than fifteen years and 33.0% greater than 45 years of age was suffering from hypertension in our country [12]. Jabeen concluded the diabetes mellitus and stroke are because of the complication of

hypertension in our society. So, there is need of more awareness and knowledge for the control diabetes mellitus and hypertension for the prevention of dire consequences.

CONCLUSION:

There is a requirement of the more elaborated research works to determine the pattern of various diseases in the patients getting treatment in tertiary healthcare centers of our country Pakistan for better management for the prevention of high rates of these diseases as well as early intervention against these diseases.

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