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Effect of topical Tranexamic Acid in the treatment of peptic ulcer bleeding

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Background: Upper gastrointestinal bleeding due to peptic ulcer disease is one of the most common emergencies that gastroenterologists encounter. The aim of this study is evaluating the effect of local Tranexamic Acid via endoscopic procedure for control of peptic ulcer bleeding.

Materials and Method: In this study, 100 eligible patients with upper GI bleeding due to peptic ulcers enrolled and divided to two equal groups: in the first group epinephrine injection plus Argon Plasma Coagulation applied as standard treatment (control group), in the second group Tranexamic Acid solution sprayed in addition to standard treatment (intervention group). Estimated blood loss volume, the necessity of blood transfusion, hemoglobin drop, blood pressure, heart rate, need to the second endoscopy, mortality rate, need to surgery, admission duration, and drug effectiveness regarding the ulcer location (duodenum or stomach) were evaluated in both groups and the differences expressed statistically.

Results: The mean average ages of intervention and control groups were 62.8 ± 19.6 and 63.1 ± 17.8 , yrs respectively estimated blood loss and need for transfusion were lower in the intervention group compared with the control group (p -value < 0.05). 8 patients (16%) in the intervention group and 17 (34%) in the control group had rebleeding and underwent endoscopy ($p = 0.038$). But hemoglobin drop, blood pressure, heart rate, mortality rate, need to surgery, admission duration, and drug effectiveness regarding the ulcer location (duodenum or stomach) hadn't statistically differed in two groups (P -value > 0.05)

Conclusion: Tranexamic Acid is a useful additive treatment for control of upper gastrointestinal bleeding and can be used in addition to standard treatment.

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