

中文題目:預防性抗生素於 肝硬化病患合併消化道潰瘍出血 經內視鏡初步治療後之影響

英文題目: The Influential Roles of Antibiotics Prophylaxis in Cirrhotic Patients with Peptic Ulcer Bleeding after Initial Endoscopic Treatments

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Background: The influential roles of antibiotic prophylaxis on cirrhotic patients with peptic ulcer bleeding are still not well documented. The purpose of this study is to clarify these influential roles and to identify the risk factors associated with rebleeding, bacterial infection and in-hospital mortality.

Methods: Total 210 cirrhotic patients with acute peptic ulcer hemorrhage who underwent therapeutic endoscopic procedures. Patients were divided into group A (with prophylactic intravenous ceftriaxone, n = 74) and group B (without antibiotics, n = 136).

The outcomes were length of hospital days, prevention of infection, rebleeding rate and in-hospital mortality.

Results: More patients suffered from rebleeding and infection in group B than group A (31.6% vs. 5.4%; $p < 0.001$ and 25% vs. 10.8%; $p = 0.014$ respectively). The risk factors for rebleeding were active alcoholism, unit of blood transfusion, Rockall score, MELD score and antibiotic prophylaxis. The risk factors for infection were active alcoholism, Child-Pugh C, Rockall score and antibiotic prophylaxis. Rockall score was the predictive factor for in-hospital mortality.

Conclusions: Antibiotic prophylaxis in cirrhotic patients after endoscopic interventions for acute peptic ulcer hemorrhage reduced infections and rebleeding rate but not in-hospital mortality. Rockall score was the predictive factor of in-hospital mortality.