



WELCOME

Lifestyle of the Patients Suffering from Amoebic Liver Abscess: A Hospital Based Study

Dr. Debashis Biswas¹, Dr. Md. Harun-or-Rashid², Dr.
Nazmul Huda Sumon³, Dr. Md. Anayet Ullah⁴,
Dr. Khandaker Faysal Alam⁵, Dr. A.R.M. Saifuddin Ekram⁶
Rajshahi Medical College Hospital, Rajshahi

Background

- Amoebic liver abscess although fairly common in developing countries and major health problem in Bangladesh. However, no organized effort has been made in doing analysis of lifestyle in the country.

Objectives

- Our objectives were to observe the personal habits and hygiene (e.g. food habit, hand washing, uses of safe drinking water, intake of alcohol, uses of sanitary latrine etc.) of amoebic liver abscess patients.

Materials and Methods

- This was a descriptive cross-sectional study carried out in the Department of Medicine, Rajshahi Medical College Hospital, Rajshahi from January 2010 to December 2010. After taking full history and requiring investigations 73 patients, who fulfill inclusion and exclusion criteria, were included in this study.

Inclusion criteria:

- Patients between the age of 14 year to 55 year both male and female.
- Clinically detected and confirmed cases of amoebic liver abscess.

Exclusion criteria:

- Age below 14 year and above 55 year
- Patients having diabetes and other co-morbidities.
- Liver abscess patients bacteriological culture positive.

Results

- This study was carried out on 73 patients with clinically, ultrasonographically and serologically confirmed amoebic liver abscess (ALA). The majority were young or middle aged male (91.8%) belonging to the lower socio-economic group.

Table: (I) Frequency distribution of subjects by sex in different age groups (N=73)

Age Group in Year	Sex				Total	
	Male		Female		N	%
	N	%	N	%		
14-24	7	9.6	0	0	7	9.6
25-34	26	35.6	3	4.1	29	39.7
35-44	26	35.6	2	2.8	28	38.4
45-55	8	10.9	1	1.4	9	12.3
Total	67	91.7	6	8.3	73	100

Table: (VII) Source of drinking water of the ALA patients (N=73)

Water supply	No. of patients	%
Tube well	39	53.4
Dug well	20	27.4
More than one source	11	15.1
Supply water	3	4.1
Total	73	100

Table: (VIII) Types of toilet used by the ALA patients (N=73)

Types	No. of patients	%
Non water seal latrine	45	61.6
Water seal latrine	15	20.5
Open air defecation	13	17.8
Total	73	100

Table: (X) Materials used for hand washing by ALA patients (N=73)

Types of Material	Before Meal		After Defecation	
	N	%	N	%
Water	61	83.6	55	75.3
Ash	10	13.7	13	17.8
Soap	2	2.7	5	6.8
Total	73	100	73	100

Table: (X1) Practice of taking fresh food by ALA patients (N=73)

Types of food	No. of patients	%
Frequent intake of previous days food	41	56.2
Daily cooked food	32	43.8
Total	73	100

Among the 73 patients 52(71.2%) had history of intake Alcohol. Out of 52 patients 31 (42.5%) patients had intake fermented rice, 18 (24.7%) patients had intake palm juice and 3 (4.1%) had intake brand alcohol.

Table: (XII) Types of alcohol intake among ALA patients (N=52)

Types of alcohol	No. of patients	%
Fermented rice	31	42.5
Palm juice	18	24.7
Brand alcohol	3	4.1
Total	52	71.2

Table: (XIII) Duration of alcohol intake among ALA patients (N=52)

Duration	No. of patients	%
5-10 years	30	41.1
>10 years	12	16.4
<5 years	10	13.7
Total	52	71.2


Conclusion

- Amoebic liver abscess was commonly seen in middle-aged male. Most of them came from rural area with poor living condition and poor hygiene. Most of them were not habituated to wash their hand properly, did not use safe water for drink and frequently ingested left-over food. Majority were habituated to intake alcohol especially locally fermented brand.

RECOMMENDATION

- It is recommended that the poor water supply be improved and additional boiling of water for drinking be emphasized.
- The general public health enlightenment should be intensified. Poor hand washing practices; for instance, create large pool of carriers of the parasite.

- Other aspects of epidemiology of *E. histolytica* infection like the sanitary conditions of the patients' home should be improved because this would be of great help in reduction and control of the amoebic liver abscess.
- Lastly, as most of them habituated to intake alcohol especially locally prepared brand, we should address this factors and take awareness



building program with the collaboration of Government to abstinence of alcohol especially locally prepared which may help to reduced the burden of amoebic liver abscess.

- Further large scale study may be done to see the actual relation between amoebic liver abscess and alcohol.

Author

1. Dr Debashis Biswas, Assistant registrar, Department of Medicine, Rajshahi Medical college Hospital, Rajshahi.
2. Dr. Md Harun-Or-Rashid MCPS (Medicine) , MD (Hepatology) Assistant Professor and Head, Department of Gastroenterology, Rajshahi Medical College Hospital, Rajshahi
3. Dr. Nazmul Huda Sumon, Resident Physician, Medicine, Rajshahi Medical College Hospital, Rajshahi
4. Dr. Md. Anayet Ullah M.Phil(psm), DCM, MHPEd, Ph.D(Epi) Lecturer, Department of Community Medicine, Rajshahi Medical College, Rajshahi
5. Dr. Khandaker Faysal Alam, Assistant professor, Department of Microbiology, Rajshahi Medical College, Rajshahi
6. Prof. A.R.M. Saifuddin Ekram FCPS (Medicine), FACP (USA), PhD, FRCP (Edin) Professor and head, Department of Medicine, Rajshahi Medical College Hospital, Rajshahi



Thank You