

PERITONIT – DIAGNOSIS AND THE IMPORTANCE OF CORRECT APPROACH

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Abstract: This article highlights the etiology, pathogenesis, and clinical signs of peritonitis, as well as modern methods of diagnosis and treatment.

Keywords: Local peritonitis, diffuse peritonitis, detoxification, microorganisms, peritoneal membrane, tachycardia, sepsis, toxic shock

Peritonitis – Early Diagnosis and the Importance of Proper Approach

Peritonitis is a severe and life-threatening disease characterized by inflammation of the peritoneum, the serous membrane lining the abdominal cavity. This condition usually develops when bacteria, fungi, or chemical substances enter the abdominal cavity. Peritonitis most often occurs due to injury or perforation of internal organs (such as the appendix, stomach, or intestinal wall), purulent infections, or postoperative complications. The disease progresses rapidly and has a strong systemic impact.

The main clinical signs include severe and persistent abdominal pain, rigidity of the abdominal muscles (known as “board-like abdomen”), fever, tachycardia, general weakness, nausea, and vomiting. In severe cases, patients may develop intoxication and sepsis.

Early detection and immediate treatment of peritonitis are crucial. Diagnosis is based on clinical signs, laboratory tests, and instrumental examinations. Treatment is usually comprehensive and includes antibacterial therapy, detoxification measures, and in most cases, surgical intervention. Timely medical care is vital for saving the patient’s life.

Peritonitis can manifest in different forms, classified according to its origin, spread, and progression:

1. According to the spread:

- **Localized (local) peritonitis** – inflammation is confined to a specific area of the abdominal cavity.
- **Diffuse peritonitis** – inflammation spreads throughout the abdominal cavity and is severe.

2. According to origin:

- **Primary peritonitis** – infection reaches the peritoneum through blood or lymph (rare).
- **Secondary peritonitis** – the most common type, resulting from organ perforation or purulent infections.
- **Tertiary peritonitis** – a severe, prolonged form that may persist even after treatment.

3. According to progression:

- **Acute peritonitis** – develops rapidly with pronounced and severe symptoms.
- **Chronic peritonitis** – develops slowly with less pronounced symptoms.

4. According to cause (etiology):

- **Bacterial peritonitis** – caused by microorganisms.

- **Aseptic (chemical) peritonitis** – develops when substances such as bile, blood, or gastric juice enter the abdominal cavity.

Each form has specific clinical signs and treatment approaches, and accurate identification is crucial for effective patient management.

Clinical Signs of Peritonitis:

Peritonitis usually develops rapidly and severely affects the patient's general condition. Key clinical features include:

- **Severe, persistent abdominal pain** – initially localized but later spreading throughout the abdomen; aggravated by movement, coughing, or deep breathing.
- **Abdominal muscle rigidity** – “board-like abdomen”; pain intensifies upon palpation.
- **Fever and chills** – indicating an inflammatory process.
- **Nausea and repeated vomiting** – disruption of digestive function.
- **Changes in bowel activity** – constipation or diarrhea, absence of gas (meteorism).
- **Tachycardia and rapid breathing.**
- **Dry mouth and thirst** – signs of dehydration.
- **General weakness, lethargy, loss of appetite.**

In severe and late stages:

- **Hypotension** – decreased blood pressure.
- **Confusion or reduced consciousness.**
- **Pale or grayish skin.**
- **Sepsis and infectious-toxic shock** may develop.

The symptoms intensify over time, making early diagnosis and prompt medical intervention critical for saving lives.

Prevention of Peritonitis:

Preventive measures focus on addressing the underlying causes and early treatment of conditions that may lead to peritonitis:

1. **Prompt treatment of abdominal organ diseases** – conditions such as appendicitis, gastric or intestinal ulcers, or cholecystitis must be addressed early to prevent organ perforation and infection spread. Any abdominal pain should prompt immediate medical consultation rather than self-treatment.
2. **Postoperative care** – adherence to medical advice, hygiene rules, timely medication, and follow-up examinations prevent postoperative infections.
3. **Personal hygiene and proper nutrition** – consuming clean, high-quality food, drinking boiled water, and frequent handwashing reduce the risk of harmful microorganisms entering the body.
4. **Strengthening immunity** – a healthy lifestyle, adequate sleep, physical activity, and a vitamin-rich diet enhance the body's ability to fight infections.
5. **Avoiding trauma** – abdominal injuries can damage internal organs and lead to peritonitis.

In conclusion, prevention of peritonitis relies on regular health monitoring, early treatment of diseases, and adherence to medical recommendations.

Practical Recommendations:

- Take any severe or persistent abdominal pain seriously. Self-administering painkillers may mask symptoms and complicate diagnosis; seek immediate medical attention.



- Avoid home treatment. Peritonitis is a rapidly progressing and potentially fatal condition requiring qualified medical care.
- Monitor your condition after surgery. If fever, abdominal pain, or general deterioration occurs, contact a doctor immediately.
- Maintain proper nutrition and hygiene. Consuming easily digestible, high-quality food and avoiding harmful habits strengthens the body.
- Attend regular medical check-ups to detect abdominal organ problems early and prevent severe complications.

References:

1. Tashkent Medical Academy (TMA) – *Surgical Diseases* textbook
2. Materials on peritonitis, its etiology, and clinical signs
3. Tashkent Medical Academy – *Propaedeutics of Internal Medicine* textbook
4. General information on abdominal inflammatory diseases
5. Republican Scientific Center for Emergency Medical Aid – clinical protocols and surgical manuals
6. Practical recommendations for diagnosis and treatment of acute peritonitis
7. Ministry of Health of Uzbekistan – collection of clinical protocols
8. Official recommendations on acute abdomen syndrome and peritonitis
9. Tashkent Pediatric Medical Institute – *Pediatric Surgery* textbook
10. Features of peritonitis progression and treatment in children