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Surgery and chronic stress ultimately leading to major health risks

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Introduction: In this article I shall be trying to show how surgery irrespective to age and/ or organ becomes a prospective major health problem. In general about 50-60% patients undergone anyhow surgery suffer mild/moderate/severe psychobiological illness in future for a long time due to feeling of fear that he/she (1:3)(1) has lost part of his body, inside unhealed or prolonged healing process. So anxiety, tension, emotion and depression gradually burden their daily life style eventually leading to chronic stress (about 10%) in 4 years after surgery along with some major health risk.

Background: This is an observational, prospective and multi centred study under intention to treat principle. This study is a over-view about the patients from January'08 to July'14. Data was collected from the leading practitioners of a district named Khulna in Bangladesh. The practitioners are Medicinist, Gynaecologist, Orthopaedician, Eye Surgeon, General Surgeon, Psychiatrist and Neurologist. In this study the outcome shows that about 10% of post surgical (mainly those who were undergone major surgery) had been suffering from chronic stress and among them some patients experienced major health risks i.e. Hypertension, Diabetes, Stroke, Heart attack, Panic disorder, Generalised Anxiety Disorder etc.

Method: The randomly selected samples were taken from the available data in practitioners personal computer. From two Medicinists 58 (30+28) of chronic stress patients were selected. Among them 45 patients were post surgical of different age group and undergone somewhat major and minor surgeries. 5 were undergone Appendectomy at the age of 6 to 8 yrs. Now they are 10 to 12 yrs old who were settled after treatment at the preliminary stage. 33 patients were undergone Total Abdominal Hysterectomy. The most of them responded well at follow up treatment from acute state of stress. 5 patients became sufferers of chronic stress in 4 yrs after surgery. 10 patients were dropped out after 1 yr of treatment. So they are excluded from this study. Among those 5 patients, 1 experienced stroke after 1 yr and another died from heart attack.

83 patients of various age groups were selected from Surgeons data. All of them undergone major or minor surgery. 23 of them were teenager. Two of teen age group became chronically stressed at the age of 18 yrs and were referred to Psychiatrist. These patients were found out from the Psychiatrists data and the outcome was that they did not cure in treatment. Among the adult ones (60) those undergone major surgery 5 patients had been faced symptoms of chronic stress and finally they remained in the stressed state. But rest of them were treated well in course of time.

151 patients were taken in account from the data found in Gynaecologists p.c. 131 of them undergone Total Abdominal Hysterectomy (TAH). The TAH patients taken from the Medicinists are not included in this nos. of patients. 15 patients were of Lower Uterine Ceasarian Section (LUCS) and 5 were of resection of fibroid uterus. No problem was for the patients of LUCS in follow up treatment but 1 of the fibroid uterus patients and 15 of TAH patients suffered long time psychological problem. After 3 yrs of treatment they were referred to Neuro-Psychiatrists. After two yrs treatment 2 of them were a bit well, but 13 patients had been suffering from chronic stress of those 3 died from heart attack and 2 faced stroke. Some of them experienced Diabetes, GAD etc.

23 patients were included in this study coming from Orthopaedician's data. All were undergone ORIF (Open Reduction & Internal Fixation) for lower limb bone fracture. Nails and plates were kept in situ. Among them 3 (1 male 2 female) were suffering from chronic stress those who were referred to Neurologist after two yrs of follow up treatment. Seven were dropped out and found no trace at their address possibly due to shifting their working place. So no concrete outcome is found here and here is the gap of this study.

Three patients were included from the Ophthalmologist who had been done cataract operation and after 3 follow up visit they were fine. Most of the patients of this study were taken from the data of Psychiatrist and Neurologist. 215 (115 + 100) samples were taken from two Psychiatrists. The patients were of different ages. 85 and 69 were post surgical patients. 15 and 13 patients undergone minor (Appendectomy) surgery at the age of 8 to 12 years. During the study they passed 4 yrs of age more. Among them 2 were of chronic stress patients. Other covariates for them were social and family events. They experienced paternal exposure to maternal stress. So it cannot be concluded that they had been suffering from chronic stress only due to surgery and