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**Risk-Associated Mortality in Patients with Peritonitis Due to Sandorica Koetjape Seed Ingestion: A Retrospective Study**

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**Abstract**

**Objective:** To identify the factor associated with the mortality of patients with peritonitis due to Sandoricum koetjape seed ingestion.

**Material and Method:** Thirty patients who presented with peritonitis and had a history of Sandorica seed ingestion between September 2009 and August 2012 were retrospectively reviewed. Gender, age, comorbid, number of ingested seed, duration of symptom, body temperature, shock at initial admission, extent of peritonitis, presence of free air under the dome of the diaphragm, white blood cell count, serum bicarbonate levels, resuscitation time, severity of intraabdominal contamination, perforated wound size, and operation methods were analyzed for their association with the mortality using Fisher's exact test. Odds ratio (OR) and 95% confidence interval (CI) were calculated to determine the strength of association.

**Results:** All patients received a definite diagnosis of Sandorica seed-induced colon perforation intraoperatively. Six of 30 patients died during 28-day hospitalization. The result showed that shock at initial admission (OR 35.0, 95% CI 2.9-411.4,  $p = 0.002$ ), serum bicarbonate levels less than 15 mmol/L (OR 19.0, 95% CI 1.7-201.6,  $p = 0.009$ ), and severe intraabdominal contamination (OR 10.0, 95% CI 1.3-74.5,  $p = 0.029$ ) were the significant factors associated with the mortality.

**Conclusion:** The factor-associated mortality in patients with peritonitis due to Sandorica seed ingestion was consistent with a clinical picture of septic shock. Early recognition and treatment of hypotensive episode accompanying with surgical correction and control of infection is therefore a key to improve the mortality outcome of this group of patients.

**Keywords:** Mortality, Colon perforation, Risk factor, Sandorica seed

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