CONCLUSION
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Fifty two cases with the chief complaint of bleeding per rectum were evaluated sigmoidoscopically because in these patients the causes of bleeding per rectum were not determined by simple diagnostic tools like proctoscope. The results obtained were as follows:

- In about 4 percent of patients with complaint of bleeding per rectum, lesions were beyond the reach of proctoscope.

- Sigmoidoscopy has been found to be safe, simple, cheap and quick procedure and it can usually be carried out without prior bowel preparation in any clinic. No complications of technique were seen in the present series.

- The sigmoidoscopy showed a better diagnostic yield (71%) than the barium enema.

- Among the different lower gastrointestinal diseases presenting with bleeding per rectum, colonic malignancy and ulcerative colitis are quite common in this part of the country which can be well interpreted by the observation that 27% each of all cases undergoing sigmoidoscopy in the present study had colonic malignancy and ulcerative colitis.
- We did find age and sex predilection of colonic malignancy, which was found to be more common in males (32%), with age group 51-60 years.

- Ulcerative colitis showed highest incidence in 2nd and 3rd decade but did not show any marked sex predilection.

- Inflammatory bowel disease in early stages can quickly be recognised by sigmoidoscope.

- In the present study it had been seen that the patients who present with loose stools mixed with blood or frank bleeding per rectum or having occult blood positive in stools, if subjected to sigmoidoscopy lead to early detection of malignancy, which is amenable to surgical treatment.

- In 28% cases the cause of the bleeding per rectum was not determined on rigid sigmoidoscopy that means lesions where beyond the reach of the sigmoidoscope and requires further evaluation by other means.

- The present study showed the feasibility of sigmoidoscopy as first line procedure without barium enema study in the lower gastrointestinal diseases presenting with bleeding per rectum.