

Acute mesenteric ischemia by small bowel volvulus

Anna Favia

Section of Diagnostic Imaging, Interdisciplinary Department of Medicine, "Aldo Moro" University of Bari, Polyclinic of Bari, Piazza G. Cesare 11, Bari, Italy.

Phone: +39-3403-5969-57; Email: annafavia@libero.it



Figure 1: Abdominal CT showing diffuse gastric and intestinal pneumatosis associated to massive portal venous gas; jejeunal-ileal volvulus is evident at the lower left abdominal quadrant.

Description

A 85-years-old woman was referred to our Accident and Emergency Department for the onset of abdominal pain and vomiting for 5 hours. In anamnesis, the patient had only hypertension; no previous surgery reported. Lab exams showed leukocytosis (22.500/mm³), elevated value of CRP (230 mg/L) and LDH (835 U/L). The abdominal examination revealed an abdomen severely tender to palpation, with rigidity and rebound tenderness. Computed Tomography was then performed, identifying diffuse gastric and

intestinal pneumatosis, from the walls of the stomach up to the ileum and associated to massive portal venous gas; acute mesenteric ischemia was determined by a jejeunal-ileal volvulus (Figure 1). The patient underwent to emergency surgery, with some necrotic intestinal loops and others in vascular distress; after two stoma placement, septic shock occurred and the patient died 3 hours after surgery.

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Authors Information: Anna Favia*

Section of Diagnostic Imaging, Interdisciplinary Department of Medicine, "Aldo Moro" University of Bari, Polyclinic of Bari, Piazza G. Cesare 11, Bari, Italy.

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