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Intestinal ischemia caused by idiopathic mesenteric hematoma: A case report

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The patient was a man in his 80s. He presented to our out-patient department with lower abdominal pain and melena. After a thorough examination, strangulated small bowel obstruction was suspected. There was no history of trauma. He had a surgical history of rectal cancer (laparotomy-22 years earlier), chronic atrial fibrillation and gout. The abdomen was distended and tenderness was observed in the lower abdomen. Laboratory tests showed a mildly elevated inflammatory response and remarkably, PT-INR (28.4) was seriously prolonged. A CT scan of the abdomen revealed ascites effusion, edematous changes in the small intestinal wall and increased mesenteric density, which suggested a hematologic origin. The patient was diagnosed with strangulated small bowel obstruction and emergency surgery was performed. Vitamin K and fresh-frozen plasma were administered preoperatively and the patient underwent laparoscopic surgery.

A hematoma and bloody ascites filled the abdominal cavity and adhesions of the large and small intestine were observed. The adhesive small intestine showed an anaemic change that suggested ischemia and a large hematoma was observed in the pathologic mesentery. After adhesion lysis, the ischemic small intestine was resected and anastomosed. The patient had no serious postoperative complications except for Grade 1 pseudomembranous enteritis and he was discharged on

the 24th postoperative day. Histopathological, the resected specimen showed an intra-mesenteric hematoma and ischemic changes in the perfusion area. Histological examination revealed stasis and haemorrhage from the submucosa to the serosal membrane adhesions. Based on the above, we made a final diagnosis of intestinal ischemia caused by an idiopathic mesenteric hematoma. Retrospectively, the patient was on warfarin for chronic atrial fibrillation and bucolome was added 3 weeks before surgery. Bucolome competitively inhibits cytochrome P450 (CYP)2C9, slowing catabolism of warfarin. Frequent monitoring is recommended when using drugs that potentiate warfarin effects.

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Biography

Taichi Mori obtained his M.D. at Asahikawa Medical University. After that he started surgical residency in Jyuzen Hospital and Atago Hospital.

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