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(CASE REPORT)



Perforated jejunal diverticulitis: A case report

Abidine L'kbir *, Maroua Benali, Lina Laasri, Hicham Bensalem, Youssef Abdelhafid, Stephane Arblade and Safia Bergueil

Radiology Department, Quesnay Hospital, Mantes la jolie, France.

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Abstract

Jejunal diverticulitis is a rare pathology identified either incidentally on imaging or intra-operatively. a delayed diagnosis can lead to significant morbidity and mortality. We report a case of a 58 -year old with history generalized abdominal pain. Computer tomography scan revealed a perforated jejunal diverticulum. The patient underwent small bowel resection with primary anastomosis.

Key words: Jejunum; Diverticulosis; CT scan; Intestinal Perforation

1. Introduction

Jejunal diverticulosis is a relatively rare condition with a reported annual incidence of 0.3–2.3% [1]. The majority of cases are asymptomatic and found incidentally either on computed tomography (CT) scan or at the time of operation for an unassociated condition. , they can be come acutely inflamed (diverticulitis) or have a more complicated presentation including perforation, intestinal bleeding, or obstruction [2]. Owing tothe rarity of this condition and varied presentation, clinical diagnosis alone remains challenging and adjunctive imaging techniques are commonly required in order to form a prompt diagnosis.

2. Case presentation

A 58 year old lady presented with abdominal pain and vomiting. Her examination revealed a peritonitic abdomen, prompting an urgent CT scan, which revealed a faeculent walled off collection measuring 30x27mm abutting the small bowel loops . She remained haemodynamically stable. the patient underwent alaparotomy. This revealed a contained perforation attached to the proximal jejunum on its anti- mesenteric border [Fig. 1]. Its contents were frankly faeculent, and a decision was made to resect a section of small bowel including the perforation. Her recovery was uneventful, and she was discharged home 1 week post- operatively.

3. Discussion

Diverticulosis is a relatively common disorder, most commonly affecting the colon, however, other sites including the duodenum, jejunum and ileum may also be affected. The causes of small bowel diverticulaespecifically are unclear; however, some studies have postulated that abnormal neuromotor innervation causing intestinal dyskinesia may be a factor.

^{*} Corresponding author: L'kbir

In the majority of cases, jejunal diverticulosis is diagnosed incidentally either on imaging or intraoperatively. However, around 10–30% of patients present with disease complications including diverticulitis, perforation, bleeding, or small bowel obstruction [46]. Isolated perforation is extremely rare.

Patients typically present with non-specific symptomatology including acute abdominal pain, obstructive symptoms and intestinal bleeding will be picked up incidentally on imaging or intra-operatively, often a delay in making the correct diagnosis.

The treatment of choice for complicated jejunal diverticulitis is an exploratory laparoscopy or laparotomy with resection of the diverticulum or segmental resection of small bowel. Non- surgical management, withintravenous fluids, antibiotics, and bowel rest, has shown to be useful in acute uncomplicated cases.

Knowledge of the possibility of conservative management of these stable patients is of great importance, as not all patients with jejunal diverticulitis require a laparotomy1 With a disease prevalent amongst an elderly population, conservative management of acute uncomplicated cases could reduce the morbidity and mortality associated with a large surgery.

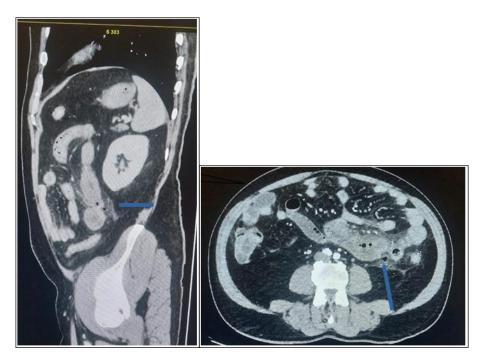


Figure 1 Contrast-enhanced CT image shows jejunal diverticula as round, thin-walled structures with no recognizable folds. Note gas within peritoneal cavity and infiltration of perijejunal fatty tissue.

4. Conclusion

Jejunal diverticulosis is an uncommon, with scarce data available on the appropriate investigation and management pathways. Its presentation is difficult to differentiate from other intra-abdominal pathology, with non-specific symptoms that could be mistaken for colonic diverticulitis, appendicitis or any number of common presentation. The general consensus on its management is similar to that of colonic diverticular disease, though more research needs to be done with regards to a pathway for its management.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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