

AB128. SOH21AS018. An unusual case of gastrointestinal bleeding and small bowel obstruction

Conor Nash, Cian Davis, Patrick Jordan, Tarig Abdelafiz

Department of Surgery, St Luke's General Hospital, Kilkenny, Ireland

Background: Gastrointestinal bleeding and small bowel obstruction are general surgical complaints frequently managed in the acute setting. They may rarely present together. Jejunal lymphoma is a potential, though infrequent, cause for such symptoms and has management implications that differ significantly from more commonly encountered causes. Lymphoma is the most common malignancy of the small bowel and accounts for 15–20% of all small intestinal neoplasms. They may mimic inflammatory bowel disease and should be included in differential diagnoses.

Methods: Case information: a 60-year old male presented to our centre with a 2-day history of epigastric pain, haematemesis and large-volume PR bleeding. His background included enteropathy-associated lymphoma on a background of Coeliac disease treated with jejunal resection and primary anastomosis. Computed tomography of abdomen was performed after admission, demonstrating a new area of jejunal lymphoma, likely recurrence at the previous resection site and porta hepatis invasion by an ill-defined mass lesion. His bowel obstruction and gastrointestinal bleed were considered for palliative chemotherapy, though the patient unfortunately subsequently passed away.

Conclusions: Learning objectives: lymphoma is the most

common malignancy of the small bowel and accounts for 15–20% of all small intestinal neoplasms. Jejunal lymphomas account for the minority of these lesions. They are nearly always B-cell non-Hodgkin's lymphomas. This case represents an unusual presentation of porta hepatis invasion and small bowel obstruction. In the context of disseminated recurrent disease such as this, the prognosis is poor and management is principally symptom control.

Keywords: Emergency surgery; gastrointestinal bleeding; jejunal lymphoma; porta hepatis; small bowel obstruction

Acknowledgments

Funding: None.

Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the non-commercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: <https://creativecommons.org/licenses/by-nc-nd/4.0/>.

doi: 10.21037/map-21-ab128

Cite this abstract as: Nash C, Davis C, Jordan P, Abdelafiz T. An unusual case of gastrointestinal bleeding and small bowel obstruction. *Mesentery Peritoneum* 2021;5:AB128.