



Image of the month

Occlusive hematoma inside the jejuno-jejunal anastomosis after gastrectomy: Early diagnosis and treatment[☆]



Hematoma oclusivo a nivel del pie de asa posgastrectomía: diagnóstico precoz y tratamiento

Clara Codony Bassols,^{*} Júlia Gil Garcia, Elisabet García-Moriana, Marcel Pujadas de Palol

Servicio de Cirugía General y Digestiva, Hospital Universitari Dr. Josep Trueta, Girona, Spain



Figure 1

The patient is a 39-year-old man on the second postoperative day after subtotal gastrectomy with laparoscopic Roux-en-Y reconstruction for pyloric cancer. He presented acute, intense pain with abdominal distension and vomiting. Computed tomography showed an occlusive hematoma at the base of the loop, causing retrograde dilatation of the biliopancreatic and intestinal loops (Figure 1). Urgent surgery was performed by accessing the jejuno-jejunal anastomosis through the previous assistance incision. The anastomotic sutures were removed to evacuate the hematoma and later re-sutured, thereby resolving an atypical occlusive condition with the potentially serious complication of dehiscence of both the duodenal stump and the jejuno-jejunal anastomosis. Diagnosis of the case: occlusive hematoma at the base of the post-gastrectomy loop

[☆] Please cite this article as: Bassols CC, Garcia JG, García-Moriana E, Palol MPd. Hematoma oclusivo a nivel del pie de asa posgastrectomía: diagnóstico precoz y tratamiento. Cir Esp. 2018;96:583.

^{*} Corresponding author.

E-mail address: clcodony@gmail.com (C.C. Bassols).