



Image of the month

Aortoenteric fistula still remains a diagnostic challenge

Fístula aortoentérica, aún continúa siendo un reto diagnóstico

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Fig. 1

A 74-year-old male patient underwent elective surgery for an infrarenal abdominal aortic aneurysm, performing aortic bi-iliac bypass and aneurysmorrhaphy. During the postoperative period, he presented spikes in fever, with no clinical repercussions or elevated inflammatory parameters. In the absence of a clear focus of infection, abdominopelvic CT angiography was requested (Fig. 1), revealing a fistula between the sigmoid and the aneurysm sac. The patient underwent reoperation, which included removal of the prosthesis and reconstruction with cryopreserved bifurcated aorta and a Hartmann procedure. *Enterococcus faecalis* and *Enterococcus faecium* were isolated in the surgical samples, which were treated with targeted antibiotic therapy. Immediate postoperative progress in the ICU and on the ward was favorable.

Case diagnosis: fistula between the sigmoid and aneurysm sac.

Conflict of interest

No conflicts of interest or financial ties to disclose.

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<http://dx.doi.org/10.1016/j.cireng.2024.03.004>

2173-5077/© 2024 Published by Elsevier España, S.L.U. on behalf of AEC.