**Image of the month****Arteriovenous Fistula in the Inferior Mesenteric Territory[☆]****Fístula arteriovenosa de territorio mesentérico inferior**Silvia Carbonell,^{*} Sergio Ortiz, Pablo Enriquez, Félix Lluis

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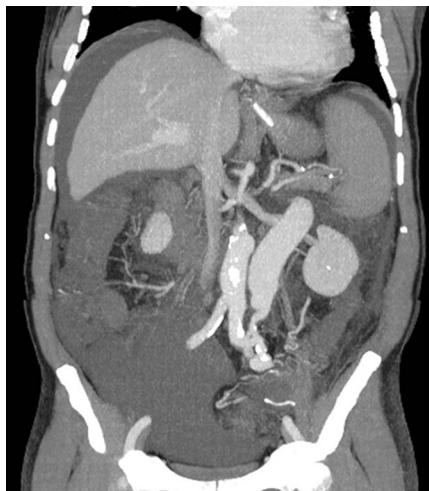


Fig. 1

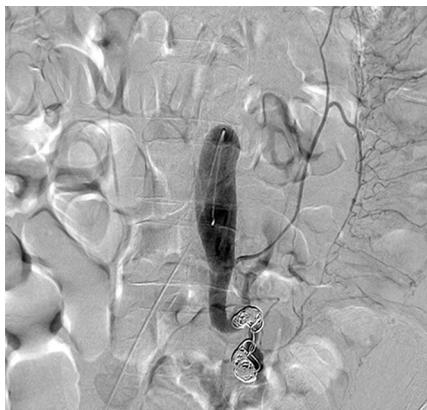


Fig. 2

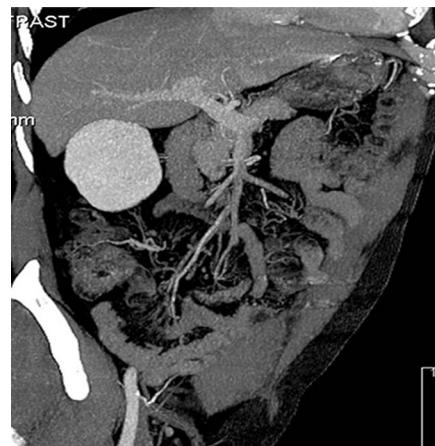


Fig. 3

The patient is a 66-year-old male, who had undergone sigmoidectomy 17 years earlier due to diverticulosis, with hypertrophic myocardiopathy and atrial fibrillation treated with Sintrom®. He reported having abdominal pain during the previous 4 days with nausea and vomiting. The abdomen was distended and tympanic with diffuse pain and no signs of peritoneal irritation. Work-up showed: 7910 L, 82% N, Quick 26%; INR 2.93.

Computed tomography showed evidence of partial thrombosis of the superior mesenteric vein (SMV), with an arteriovenous fistula of the inferior mesenteric artery to the inferior mesenteric vein (IMV) (Fig. 1). Embolization was used to completely seal the fistula in this procedure (Fig. 2). Three months after embolization, re-permeabilization of the SMV was observed with complete thrombosis of the embolized IMV (Fig. 3).

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