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## Image of the month

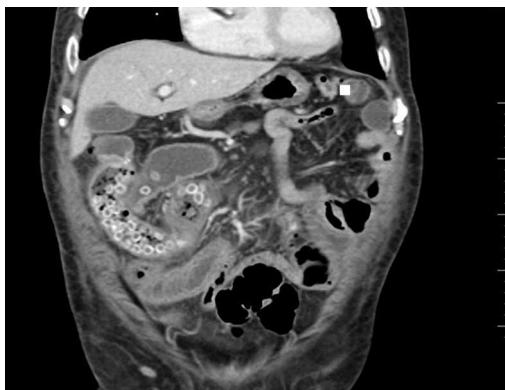
### Phytobezoar Causing Intestinal Obstruction in a Patient With a Prior Right Colectomy<sup>☆</sup>



### Fitobezoar como causa de obstrucción intestinal en paciente con antecedente de hemicolectomía derecha

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**Fig. 1**



**Fig. 2**

The patient is a 79-year-old male with a history of right hemicolectomy and ileo-transverse anastomosis due to ischemic colitis. During the previous month, he had symptoms of abdominal pain, distension and constipation. Abdominal radiograph was compatible with intestinal obstruction.

Conservative treatment was not successful. Computed tomography showed evidence of a bezoar in the distal ileum, consisting of 30–40 hyperdense nodular images, and proximal dilatation ([Figs. 1 and 2](#)). Diagnostic laparotomy found a stenotic ileo-transverse anastomosis and an accumulation of multiple fruit pits (cherries). The anastomosis was resected and a new mechanical side-to-side ileocolic anastomosis was created.

The postoperative period was favorable, with parenteral nutrition and progressive introduction of oral intake. The patient was discharged one week later. The pathology study of the surgical specimen was compatible with phytobezoar.

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