

**Image of the month****Acute Cholecystitis in a Situs Inversus Totalis Patient[☆]****Colecistitis aguda en un paciente con *situs inversus totalis***

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Figure 1



Figure 2

The patient is an 83-year-old woman with atrial fibrillation, pre-excitation syndrome and complete atrioventricular block. She came to the emergency room with declining general state and symptoms of syncope, which required pacemaker substitution. During hospitalisation, the patient began to have pain in the left flank and peritoneal irritation. The lab work demonstrated leukocytosis, neutrophilia and elevated C reactive protein levels. Given the suspicion of acute diverticulitis, a CT scan was ordered ([Figs. 1 and 2](#)), which revealed *situs inversus totalis*, acute cholecystitis with important gallbladder distension and splenic infarction. The patient was managed satisfactorily with intravenous antibiotic therapy and percutaneous cholecystectomy.

Diagnosis: *situs inversus totalis*, acute cholecystitis, splenic infarction.

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