



Image of the month

Acute Abdomen With Hemoperitoneum: A Rare Manifestation of Gastric Volvulus[☆]



Abdomen agudo con hemoperitoneo, manifestación poco frecuente del vólvulo gástrico

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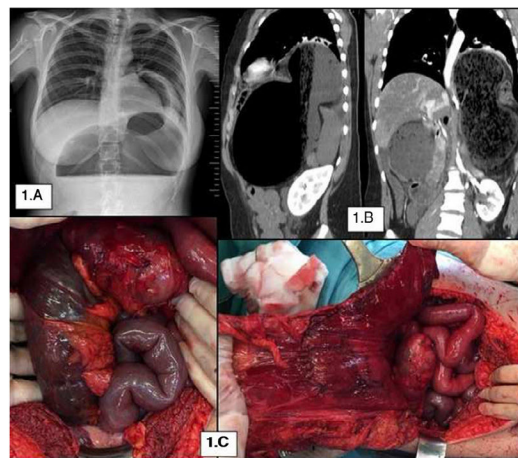


Fig. 1

The patient is a 47-year-old woman who reported epigastralgia for 24 h with nausea and no vomiting. Thoracoabdominal radiographs (Fig. 1A) showed gastric dilatation. Nasogastric tube placement was impossible. A CT scan (Fig. 1B) suggested mesenteric-axial gastric volvulus. The patient suddenly presented abdominal pain and hemodynamic shock. Laparotomy was performed, revealing hemoperitoneum, large gastric dilatation with wall serosa loss, but no signs of ischemia; a mesenteric tear was observed at the transverse mesocolon, with ischemia and splenic laceration showing active bleeding. We performed decompressive gastrotomy, devolvulation and reduction of the stomach incarcerated in a hiatal hernia by sliding; segmental resection of the transverse colon, splenectomy and simple suture of the gastric serosal injury. Twelve hours later, second-look surgery revealed gastric, right colon and ileal ischemia (Fig. 1C), and total gastrectomy, ileal resection and ascending colon resection were performed.

Diagnosis: incarcerated mesenteric-axial gastric volvulus.

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