

Image of the month

Conservative treatment in spontaneous yeyunal hematoma with moderate hemoperitoneum[☆]



Tratamiento conservador del hematoma yeyunal espontáneo

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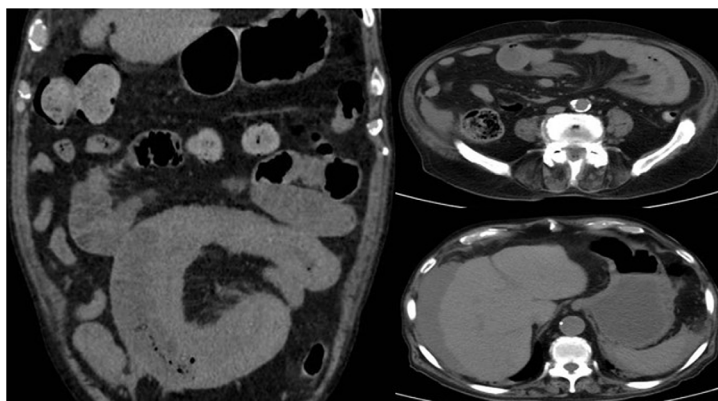


Figure 1

An 87-year-old male patient with a history of atrial fibrillation, a pacemaker and anticoagulation with acenocoumarol came to the emergency room due to abdominal pain that had evolved over the previous 5 days and hyporexia. Lab workup showed Cr >4 mg/dL, Hb 8 g/dL and incoagulable INR. Abdominal CT scan with intravenous contrast revealed a jejunal segment with hyperdense concentric wall thickening as well as perihepatic, perisplenic, paracolic gutter and pelvic free fluid, compatible with spontaneous jejunal hematoma and moderate hemoperitoneum. Urgent surgical intervention was ruled out given the hemodynamic stability of the patient and absence of active bleeding. The patient presented good evolution with conservative treatment and was discharged on the 7th day of hospitalization (Fig. 1).

[☆] Please cite this article as: Capitán del Río I, Ramos Sanfiel J, Zurita Saavedra MS, Hernández García D. Tratamiento conservador del hematoma yeyunal espontáneo. Cir Esp. 2022;100:48.

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