



IMAGE OF THE MONTH

Multiple duodenal diverticula as a rare cause of gastroduodenal bleeding[☆]



Diverticulosis duodenal múltiple como causa infrecuente de sangrado gastroduodenal

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Case report

An 89-year-old woman attended the emergency department due to syncopal symptoms secondary to upper gastrointestinal bleeding in the form of melaena of four days' evolution together with epigastric pain. She reported having taken two isolated tablets of metamizole due to knee pain. History of interest included hypertension, atrial fibrillation in anticoagulation therapy with acenocoumarol, and postoperative pulmonary thromboembolism in 2007. Laboratory tests showed haemoglobin of 7.6 g/dl, urea of 162 mg/dl and INR in range. In the emergency gastroscopy, duodenal deformity was observed by reason of multiple large diverticular openings (Figs. 1–3), with blood remnants and without stigmata of active bleeding seen. During hospitalisation, she received transfusion support, intravenous iron, and anticoagulation management and she was discharged with good evolution.

Diverticula are saccular herniations of the mucosa and submucosa through the muscular layer of the intestine. The duodenum is the second most common location, after the colon. They are generally asymptomatic and represent an

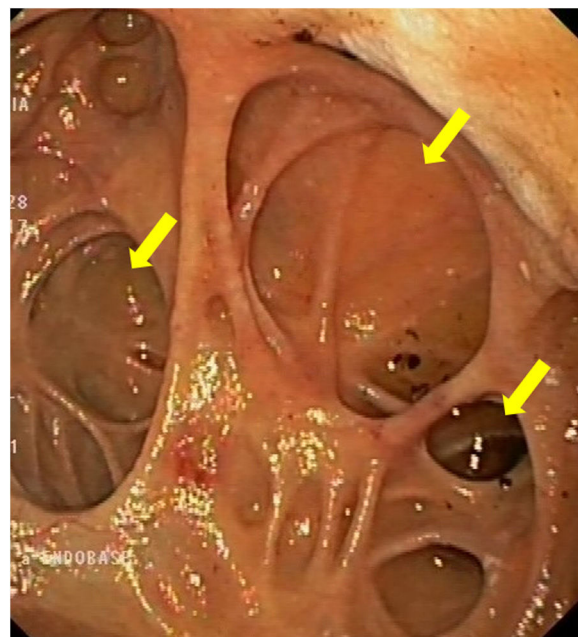


Figure 1 Duodenal bulb deformed by reason of multiple diverticula with remnants of recent bleeding, but without active bleeding (yellow arrows).

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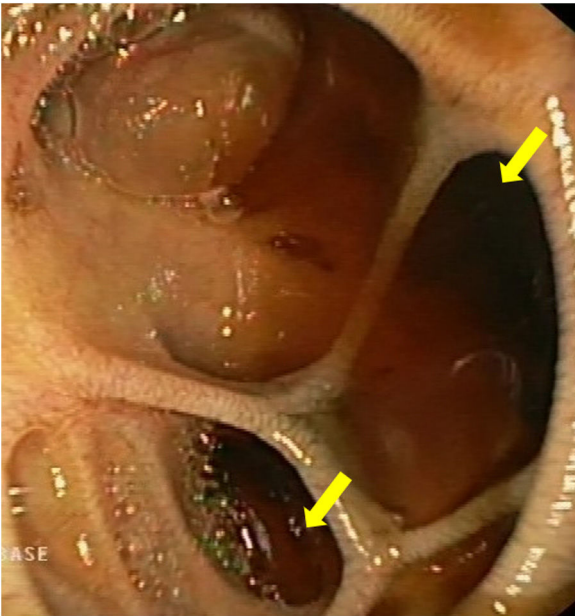


Figure 2 Multiple diverticula.

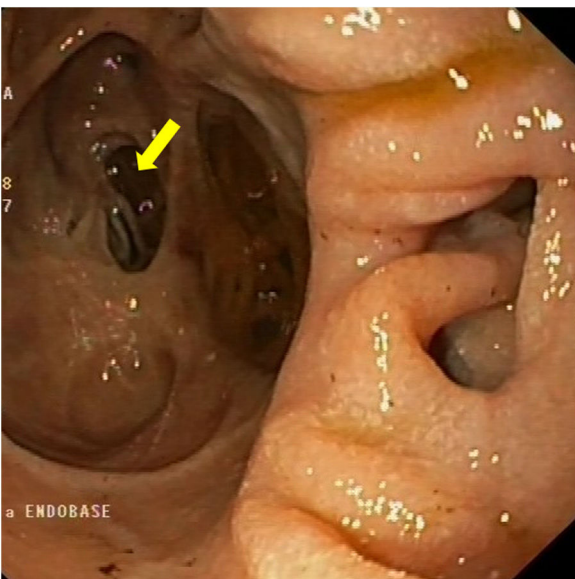


Figure 3 Multiple diverticula.

incidental diagnosis, but in up to 5% of cases can cause symptoms such as gastrointestinal bleeding, obstruction or perforation. The treatment of choice is medical and endoscopic, reserving surgery in case this fails.

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None.

Conflicts of interest

There are no conflicts of interest.

Recommended references

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