



Segmentary Perforated Enteritis with Unknown Etiology

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Clinical Image

We present the case of a young man (49 years of age), who was admitted with clinical signs of peritonitis, hypotensive (100/60 mmHg), tachycardic (heart rate 120 per minute), high white cell blood count (13.5/ μ L) and nothing else abnormal (X-ray and ultrasound normal).

The personal medical history revealed a history of dyslipidemia and no other significant pathology.

He was operated under general anesthesia. Intraoperatively we found segmentary enteritis (a segment of 20 centimeters) (Figure 1), located on the ileum, at approximately 80 centimeters from ileo-caecal valve. Macroscopically, it looked like segmentary ischemic lesions with an infracentimetric zone of total wall necrosis of the small bowel (perforation), with no identifiable cause (Figure 2).

We performed a segmentary enterectomy with anastomosis. The outcome was with no complications.

The histopathological exam confirmed non-specific enteritis of unknown etiology.

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Figure 1: Segmentary enteritis.



Figure 2: Segmentary ischemic lesions with an infracentimetric zone.