

AB197. Jejunal diverticulosis—a rare cause life-threatening gastrointestinal bleeding

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Background: Small bowel diverticulosis is a rare entity comprising of multiple outpouchings of the mesenteric border of the small bowel. The prevalence is reported at 0.2–1.3%. These pseudodiverticula are an acquired pathology of the small bowel, involving the mucosal and submucosal layers. It is hypothesised that they are pulsion diverticulae due to herniation at the site of blood vessel penetration through the bowel wall.

Methods: A 52-year-old male was transferred to our centre with an intractable lower gastrointestinal bleed. He had initially presented to a regional centre with a small volume herald bleed, and subsequently developed a large volume bleed with acute haemodynamic instability. Once stabilised, a prompt laparotomy was performed revealing extensive

blood filled, globular jejunal invaginations located on the mesenteric border, beginning approximately 30 cm distal to the duodenojejunal junction. The segment of bowel was isolated by tying off the proximal and distal ends.

Results: Several proximal diverticula were aspirated and decompressed, and observed to rapidly refill with blood, and it was deduced that the bleeding was located within the isolated bowel segment. A 77 cm segment of bowel was resected.

Conclusions: Post-operative histopathological assessment of the resected specimen revealed multiple small intestinal diverticula comprising of sac-like invaginations of the mucosal and submucosal compartments with attenuation of the muscularis propria, in keeping with jejunal diverticulosis. Jejunal diverticulosis can pose a diagnostic conundrum, as it can manifest in a variety of ways, including malabsorption, diverticulitis and cases of refractory gastrointestinal haemorrhage.

Keywords: Emergency surgery; gastrointestinal bleeding; jejunal diverticulosis

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