

A RARE CASE OF JEJUNOJEJUNAL INTUSSUSCEPTION AFTER SURGICAL REDUCTION OF ILEOCECOLIC INTUSSUSCEPTION

Edin HUSARIĆ, Nešad HOTIĆ, Amir HALILBASIĆ

Department of pediatrics
University Clinical Centre Tuzla
Tuzla, Bosnia and Herzegovina

A five month old girl, with typical clinical, ultrasound and radiological signs of intussusception underwent surgery for ileocecolic intussusception, with a long part of the colon involved. We performed manual reduction. The first two postoperative days passed normally, but over the next few days the content in the nasogastric tube increased. On the seventh postoperative day an abdominal x-ray showed signs of abdominal obstruction (Fig. 1), and a new abdominal ultrasound revealed the typical target appearance. The clinical manifestation was intestinal obstruction without an abdominal palpable mass or bloody stool. We performed laparotomy which revealed jejunojejunal intussusception (Fig. 2). Postoperative jejunojejunal intussusception after the surgical reduction of ile-

ocolic intussusception in infants and children is extremely rare and the clinical symptoms are not typical. The diagnosis of postoperative intussusception should be considered in



Fig. 1 Abdominal x-ray.



Fig. 2 Panel A: The jejunojejunal intussusception before manual reduction; Panel B: After manual reduction.

children with signs of bowel dysfunction in the early postoperative period. A high index of suspicion and prompt laparotomy will usually allow manual reduction of the lesion. Diagnostic delay may result in bowel necrosis.

Key words: Jejunojunal ■ Intussusception.

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Corresponding author:

Edin Husarić
Department of pediatrics
University Clinical Centre Tuzla
75000 Tuzla
Bosnia and Herzegovina
hamir@bih.net.ba

Tel.: + 387 35 303 369; Fax.: + 387 35 250 474

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