Spontaneous Mesenteric Hematoma with Duodenal Stenosis

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Key words: mesenteric hematoma, duodenal stenosis

(Intern Med 52: 1267-1268, 2013)
(DOI: 10.2169/internalmedicine.52.0089)

Spontaneous mesenteric hematomas are usually associated with coagulopathies, connective tissue disorders, trauma, arteriopathy, or pancreatitis. However, a few cases with no apparent underlying etiology have also been reported (1). Today, bleeding from visceral artery aneurysms associated with essential and portal hypertension is presumed to be indicative of spontaneous mesenteric hematomas (2). Duodenal stenosis caused by periduodenal hematomas is a relatively rare condition.

We herein report the case of a 64-year-old man who was referred to our hospital with epigastric pain and nausea. He had no remarkable medical history or trauma. The initial blood analysis revealed a hemoglobin level of 14 g/dL and...
no bleeding tendencies. Initial CT revealed a periduodenal hematoma with no extravasation or ruptured aneurysms (Picture 1). Upper endoscopy demonstrated stenosis of the duodenal second portion (Picture 2). When the patient’s condition had stabilized, he was treated conservatively by being placed on a nil per os status, and receiving nasogastric tubing, and total parenteral nutrition. After three weeks, the hematoma had decreased in size (Picture 3) and the duodenal stenosis was eliminated (Picture 4).

The authors state that they have no Conflict of Interest (COI).

References


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