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Summary

JEJUNAL DIVERTICULOSIS SECONDARY TO RIGHT PARADUODENAL HERNIA – AN UNCOMMON CAUSE OF IRON DEFICIENCY ANEMIA

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A 75-year-old woman with iron deficiency anemia and intermittent abdominal pain was diagnosed with right paraduodenal hernia and jejunal diverticulosis, representing the first reported case diagnosed by capsule endoscopy.

KEY POINTS

- The patient presented with severe fatigue, iron deficiency anemia (Hb 9.2g/dL, ferritin 7.6 mg/dL), and a six-month history of intermittent upper quadrant abdominal pain and vomiting.
- Capsule endoscopy was incomplete due to retention in a segment with multiple diverticula with friable mucosa, with subsequent capsule expulsion confirmed.
- Abdominal CT revealed herniation of intestinal loops through the fossa of Waldeyer with partial mesenteric torsion, compatible with right paraduodenal internal hernia, and several small bowel diverticula (largest 28mm) within the herniated jejunal loops.
- The combination of right paraduodenal hernia and acquired jejunal diverticulosis is exceptional, with left-sided hernias more frequently described in association with diverticulosis.
- Conservative management with surveillance and oral iron supplementation was chosen given the patient remained asymptomatic with good hematologic response, with low threshold for surgical intervention if symptoms recur.

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