

'ACUTE-ON-CHRONIC' MESENTERIC ISCHEMIA – A POTENTIAL LIFE-THREATENING CONDITION

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Poster

Colorectal

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A 57-year-old smoker with hypertension and stroke history presented with chronic diarrhea, 25kg weight loss, and postprandial pain, diagnosed with chronic mesenteric ischemia due to extensive mesenteric vessel occlusions and successfully treated with surgical revascularization.

KEY POINTS

- The patient had a 6-month history of non-bloody diarrhea, anorexia, 25kg weight loss (34.5% of standard weight), postprandial epigastric pain, and marked cachexia
- Extensive workup for chronic diarrhea including celiac disease, Clostridioides difficile, Giardia, and fecal calprotectin was unremarkable; endoscopy showed gastric and colonic ulcers
- Abdominopelvic angiotomography revealed extensive aortoiliac atheromatosis, celiac trunk occlusion, 4cm segmental superior mesenteric artery occlusion, and inferior mesenteric artery stenosis
- Mesenteric revascularization surgery with bypass from supra-celiac aorta to the superior mesenteric artery with extension to the celiac trunk achieved resolution of abdominal pain and diarrhea within 24 hours postoperatively
- The authors state that chronic mesenteric ischemia is rare and underdiagnosed, emphasizing the importance of considering this diagnosis in patients with atherosclerosis risk factors and typical symptoms

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