

MULTIFACTORIAL PYLEPHLEBITIS IN A PATIENT WITH ACUTE CHOLECYSTITIS AND SARS-COV2 INFECTION

Juan Luis Mendoza Hernández

UEG Week Copenhagen 2023

Poster

October 15, 2023

A case report describes left portal vein thrombosis developing in a 60-year-old woman with acute cholecystitis, liver abscess, and concurrent SARS-COV2 pneumonia.

KEY POINTS

- The patient initially presented with acute cholecystitis, a 30mm liver abscess, and choledocholithiasis, treated with antibiotics, ERCP drainage, and thromboprophylaxis.
- During admission she developed bilateral SARS-COV2 pneumonia requiring Dexamethasone and Remdesivir, followed by new left portal thrombosis detected on ultrasound.
- Coagulation studies showed no genetic or cytological alterations; management included 6 weeks of antibiotics, anticoagulation, and deferred surgical treatment.
- The authors note that portal thrombosis in abdominal locations is infrequent in SARS-COV2 infection, with very few cases described in the literature.
- The authors suggest early consideration of portal thrombosis in patients with abdominal infections and active or recent SARS-COV2 infection.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/6d958fe0-743c-11ee-98c8-0242ac140004>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.