

EVIDENCE OF JEJUNAL LONGITUDINAL MUSCLE ATROPHY AND VASCULAR ABNORMALITIES IN PATIENTS WITH IDIOPATHIC CHRONIC INTESTINAL PSEUDO-OBSTRUCTION

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Poster

Colorectal

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A study of 27 idiopathic chronic intestinal pseudo-obstruction patients found significant jejunal longitudinal muscle layer atrophy, increased fibrosis, vascular remodeling with predominance of small vessels, and markers of hypoxia compared to controls.

KEY POINTS

- Idiopathic CIPO patients showed 1.87 times decreased jejunal longitudinal muscle layer thickness compared to controls (431.9 ± 192.2 vs. 837.2 ± 446.4 μm ; $P=0.0026$) and a higher fibrosis index.
- Patients displayed lower vascular area with more submucosal vessels per mm^2 and a shift toward vessels smaller than 50 μm at the expense of medium and large vessels.
- Increased HIF-1 α expression indicated hypoxia and lower thymidine phosphorylase enzyme expression suggested alterations in local angiogenesis in the jejunum of idiopathic CIPO patients.
- Jejunal muscle thickness inversely correlated with number of sub-obstructive episodes, abdominal distension, and pain, suggesting reduced muscular thickness correlates with worse clinical phenotypes.
- The findings suggest that in addition to genetic CIPO, idiopathic forms exhibit muscular atrophy and fibrosis associated with vascular remodeling likely dependent on hypoxia and lower local thymidine phosphorylase expression.

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