A RATHER UNUSUAL CAUSE OF A CHRONIC DIARRHOEA IN AN ELDERLY PATIENT - A BRIEF LITERATURE REVIEW ON DUODENO-COLIC FISTULA SECONDARY TO CHRONIC DIVERTICULAR DISEASE

Sathish Babu

UEG Week Copenhagen 2023 | Poster

Colorectal

October 15, 2023

A case report describes a 78-year-old male with chronic diarrhoea and weight loss found to have a rare benign duodeno-colic fistula secondary to severe sigmoid diverticulosis, incidentally discovered during repeat colonoscopy and confirmed by barium fluoroscopy.

KEY POINTS

- The patient presented with a seven-year history of loose stools, weight loss, belching, bloating and flatulence, with previous investigations showing severe diverticulosis and low faecal elastase.
- During repeat colonoscopy, the colonoscope unexpectedly entered the duodenum from the sigmoid colon, revealing a wide fistula between the third part of the duodenum and sigmoid-descending junction, confirmed by barium contrast fluoroscopy.
- Benign duodeno-colic fistula is an unusual complication most commonly caused by perforated duodenal ulcer; in this case, severe sigmoid diverticulosis was identified as the extremely rare causative factor.
- Although surgical correction is the curative treatment for symptomatic cases, this patient was managed conservatively with oral antibiotics during symptom flares due to intermittent symptoms and overall good health.
- This case may be of interest to gastroenterologists encountering chronic gastrointestinal symptoms with diverticular disease and illustrates the importance of thorough investigation when symptoms persist despite initial unremarkable findings.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/f63ea0b2-743b-11ee-9055-0242ac140004

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.