gutflix
GI learning, personalised

Summary

OVERDIAGNOSIS OF SUPERIOR MESENTERIC ARTERY SYNDROME: LIMITED DIAGNOSTIC CONCORDANCE BETWEEN IMAGING MODALITIES AND LIMITED BENEFIT OF SURGERY

Tim Vanuytsel

UEG Week Barcelona 2026 | Presentation

Small Intestine & Nutrition | Endoscopy

October 19, 2026

In a 20-year tertiary center cohort, only 22% of patients suspected of superior mesenteric artery syndrome met strict hypotonic barium duodenography criteria, and conservative medical management achieved 50% symptom improvement compared to only 20% after surgery despite weight gain.

KEY POINTS

- Only 11 of 49 patients (22%) referred for suspected SMA syndrome met strict diagnostic criteria on hypotonic barium duodenography, the study's gold standard
- Clinical presentation, BMI, and weight loss were indistinguishable between HBD-confirmed SMA syndrome cases and controls, and CT criteria lacked specificity with 4 patients having positive CT but negative HBD and alternative gut-brain interaction disorders
- Conservative medical management with prokinetics and nutritional support achieved symptom improvement in 50% of patients (3 of 6), while surgical intervention (duodenojejunostomy or gastroenterostomy) produced meaningful symptom improvement in only 20% (1 of 5) despite weight gain exceeding 5% in 80% of surgical patients
- Procedure-related complications occurred in surgical patients including dumping syndrome in 2 patients and worsening gastroparesis-like symptoms in 1 patient
- The authors conclude that standard radiological findings may overestimate SMA syndrome and support a highly restrictive, conservative management strategy, questioning whether SMA syndrome represents a distinct clinical entity in most cases

– The presenter stated that conservative treatment should be first-line and expressed the view that surgery should be avoided for SMA syndrome except in cases with a different underlying diagnosis

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/c4c1497e-d129-11f1-9829-daaa6dbee0a2

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.