Atresia And Congenital Short Gut

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Discussion

Short gut syndrome is associated with life long problems of absorption, intestinal motility, and growth. Short gut syndrome may be congenital or acquired. We report a case of type III jejunal atresia with congenital short gut. A three days old female neonate presented to neonatal emergency of our institution with complaints of failure to pass meconium, bilious vomiting and reluctant to feed since birth. Xray abdomen erects showed 3 air fluid levels. Rectal stimulation yielded only mucous. A diagnosis of small bowel atresia made and patient prepared for exploratory laparotomy. At operation we found proximal jejunal atresia and congenital short gut. The jejunum was 4cm only and ileum was 6cm in length [image]. Jejuno-ileal end to end anastomosis performed. Patient is admitted in our ICU for management of short gut. Intestinal atresia is one of most frequent causes of neonatal intestinal obstruction. The etiology of atresia is multi-factorial. The most accepted etiology of atresia is the vascular accidents occurring in the mesentery of intestine. The other conditions predisposing to the formation of atresias are antenatal volvulus, intussusception, closing or closed gastroschisis and so on. In our case the total length of small intestine was 10cm (4cm distal to duodeno-jejunal junction and 6cm proximal to ileo-cecal valve). The most plausible etiology in our case would be a volvulus of mid gut, in-utero, causing congenital short gut in that patient.

References

Illustrations

Illustration 1

Image showing type III jejunal atresia and congenital short gut. The total length of small intestine was 10 cm. Jejunum (1) was 4cm and ileum (2-3) was about 6cm in length. The pylorus and duodenum (4) were present above jejunum.
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