

POSTER PRESENTATION

Abstract ID: 08

Primary Jejunal Intussusception in Pregnancy: Clinical Challenges in Management

Sharhanin Bahrudin¹, Am Basheerb¹, Siti Hartinie Mohamad¹

¹ Department of Surgery, Hospital Sultanah Nur Zahirah, Kuala Terengganu

Intussusception is a common cause of abdominal pain in paediatric age group but infrequent in adults. We reported a 29-year-old lady, Gravida 2 para 1 with no known medical illness presented to the hospital at 35 weeks of gestations with complaint of abdominal pain and persistent nausea and vomiting. She had bilious vomiting more than 5 times a day which aggravated by food intake and epigastric pain. She also complained of had not passing flatus with no bowel opening 3 days prior to presentation. At presentation, she was dehydrated however not in shock and her vital signs were within normal range. Abdominal examination revealed mild tenderness over epigastric region without guarding. There was an evidence of electrolytes imbalance and kidney injury on her blood investigation. She was induced for labour due to lack of evidence of fetal signals. On day 2 post partum, she still complaining of persistent bilious vomiting, otherwise no abdominal pain. Radiologically, there is evidence to support a small bowel obstruction. An exploratory laparotomy was performed, intraoperatively noted presence of jejuno-jejunal intussusception closely related to duodenal-jejunal junction with 130cm of bowel involved in the intussusception were noted to be gangrene. **Conclusion:** Adult bowel intussusception is an uncommon and challenging condition for the surgeon. Intussusception in pregnancy is rare and difficult to diagnose. Preoperative diagnosis is usually missed or delayed. Abdominal CT is considered as the most sensitive imaging modality in the diagnosis of intussusception. However in pregnancy, the choice of imaging modality is ultrasonography.

KEYWORDS: *Pregnancy, jejunal intussusception, management*