EAST COAST SURGICAL SYMPOSIUM 2018 SURGICAL TRAUMA: ONE STEP AHEAD

POSTER PRESENTATION

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Intestinal Evisceration in Domestic Violence: A Stab Wound Injury

Nur Hayati AS1, MRAS1

1Paediatric Surgery Unit, Department of Surgery HUSM

A 9-year-old girl, waken up from sleep with acute abdomen. Noted by care-taker, evisceration of

small bowels from a stab wound at the epigastric region. She was brought to ED with class II shock

and mild pallor. Her caretaker lodged a police report after noticed her schizophrenic uncle left

home with a knife. Following adequate resuscitation, she had emergency laparotomy. A moderate

gastric content contamination with multiple sites of perforation at the stomach, small bowels and

its mesentery was seen and repaired primarily. Postoperatively, she was ventilated in ICU, provided

with parenteral nutrition and institution of broad-spectrum antibiotics. She was extubated and

transferred to HDW on day 4 and make a complete recovery on day 10. Discussion: Paediatric

penetrating abdominal injury is much less common as compared to blunt abdominal injury. It is

important to determine the mechanism of injury as it influences the management decision. The

colon and small bowels are the most commonly injured hollow organs in penetrating injury. A bowel

injury in trauma is a leading cause of morbidity and mortality. Managing postoperative bowel injury

in paediatric required a multidisciplinary team approach for a successful outcome. A well-prepared

surgical team with a well-equipped operation room, availability of blood substitutes and the

necessary investigations are all the important links in the management of the patient of bowel

evisceration.

KEYWORDS: Domestic injury, intestinal evisceration, management