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First Reported Case of Successful Non-Surgical Management for Acute Small Intestinal Obstruction Caused by Enterolith as A Rare Complication of Jejunal Diverticulosis

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Introduction: Enterolith ileus is a rare complication of jejunal diverticulosis, which in itself is a rare entity. Here we report a rare case of enterolith ileus as a complication of jejunal diverticulosis which is successfully managed conservatively.

Case Report: A 75-year-old female presented with a 7- day history of "gripey" abdominal pain with intermittent vomiting. She was able to pass flatus and had open bowel with small amount of loose stool. Patient was previously fit and well with no significant past medical history and had not undergone previous abdominal surgery. On admission, patient was in no acute distress and was afebrile. On examination, she had a very distended tympanic abdomen with left-sided tenderness but no palpable mass. Bowel sounds were present. Laboratory investigations revealed a white cell count of 22.6 x109/L, Creactive protein of 26 mg/L and haemoglobin of 144 g/L. Abdominal Xrays revealed distended loops of small bowel indicating small bowel obstruction. CT images did not reveal pneumobilia which would be suggestive of gallstone ileus but showed intraluminal small bowel obstruction secondary to an enterolith in the terminal ileum. The scan also showed an inflamed jejunal diverticulum with fat stranding around but no perforation nor abscess was seen. The working diagnosis was acute intestinal obstruction caused by jejunal enterolith expulsed from jejunal diverticulum. Since no perforation nor abscess was noted, this patient was treated conservatively. Patient recovered uneventfully and was discharged with an MRI scheduled in 4-6 weeks for follow-up. The follow-up MRI was completely normal and patient has recovered uneventfully with conservative management.

Discussion: Acute intestinal obstruction caused by jejunal enterolith expulsed from jejunal diverticulum is rare. However, it is important to diagnose jejunoileal diverticulosis timely as they may lead to acute complications which can be life- threatening and may even cause

Conclusion: Many cases have reported jejunoileal diverticulosis being overlooked or misdiagnosed for other acute abdominal conditions. It is important to have a clinical awareness of this condition as although rare, it can lead to life-threatening complications.