Abstract

Background: Obscure gastrointestinal bleeding secondary to jejunal angiodysplasia is uncommon. Diagnostic approach is difficult and represents a challenge for the surgeon because of the inaccessibility of the small bowel for evaluation. When the diagnostic work-up has been completed and the bleeding source has not been found, it is mandatory to perform a surgical exploration with transoperative enteroscopy in order to locate the source of the hemorrhage and for further treatment. Case report: We report the case of a 24-year-old male with massive gastrointestinal bleeding secondary to jejunal angiodysplasia in whom an intraoperative enteroscopy was done to find the source of bleeding and subsequently resect the affected small bowel. Conclusion: There are actually some non-surgical therapies for patients with high risk of complications. When patients’ conditions are optimal, surgical resection is mandatory to avoid recurrence of future bleeding

Keywords

Gastrointestinal bleeding, jejunal angiodysplasia