

Available online at www.sciencerepository.org

Science Repository



Case Report and Review of the Literature

Traumatic Jejunal Mesenteric Pseudocyst in the Vicinity of Blunt Abdominal Trauma with a Brief Review of Literature

Hemlata Jangir¹, Aparna Ningombam¹, Arulselvi Subramanian^{1*} and Subodh Kumar²

¹Laboratory Medicine, Jai Prakash Narayan Apex Trauma Centre, All India Institute of Medical Sciences, New Delhi, India ²Department of Surgery, Jai Prakash Narayan Apex Trauma Centre, All India Institute of Medical Sciences, New Delhi, India

ARTICLE INFO

Article history:

Received: 24 November, 2022 Accepted: 12 December, 2022 Published: 4 January, 2023

Keywords:

Gastrointestinal system

granuloma pseudocyst

trauma mesentery

ABSTRACT

Mesenteric pseudocyst (MP) is a rare heterogeneous group of intra-abdominal benign cystic lesions with different etiopathogenesis and clinically silent behaviours. These lesions are introduced as one of the entities based on the histological features of thick fibrous cyst walls, barren of the epithelial lining. Often, they present as expanding abdominal masses or are diagnosed incidentally in conventional radiological studies, exploratory laparotomies, or with symptoms of complications such as infection, torsion, or rupture. Surgical removal of the cyst, with or without resection of the affected intestinal segment, is the treatment of choice. Depending upon the size and location of the lesion and related complications, it can be managed by open surgical procedures or laparoscopic approach. Only a handful of 7 cases of traumatic mesenteric cysts have been reported yet in the vicinity of blunt abdominal trauma. We report a rare incidentally detected case of mesenteric pseudocyst (traumatic) in a male of early 20s with a history of blunt abdominal trauma 13 months back and for which serial abdominal exploratory laparotomies were performed. A brief review of the literature is provided, conforming to the rarity of the case. This case highlights the role of histomorphology in diagnosing a benign cystic entity with accuracy, that could be misdiagnosed as infectious granulomatous lesion.

© 2022 Arulselvi Subramanian. Hosting by Science Repository.

Get access to the full version of this article: http://dx.doi.org/10.31487/j.AJSCR.2022.04.04

^{*}Correspondence to: Dr. Arulselvi Subramanian, Professor, Department of Laboratory Medicine, Jai Prakash Narayan Apex Trauma Centre, AIIMS, New Delhi 110029, India; ORCID: 0000-0001-7797-6683; Tel: 9810644033; E-mail: arulselvi.jpnatc@gmail.com