CASE REPORT

A RARE CASE OF EXTRAMURAL INTESTINAL HEMANGIOMA PRESENTING AS ACUTE ABDOMEN MIMICKING ACUTE APPENDICITIS
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HOW TO CITE THIS ARTICLE:

KEY WORDS: ExtramuraL, intestinal hemangioma, Acute abdomen.

INTRODUCTION:
1. Cavernous hemangioma is a type of blood vessel malformation that has relatively large blood filled spaces (cavities)
2. Do not contain tissue of the organ & virtually arise anywhere in the body as benign neoplasms

CASE SUMMARY:
1. 29 year old female presented to casualty with severe lower pain abdomen & 4-5 episodes of vomiting.
2. On examination pulse was 100-110 beats / min with localized guarding at RIF.
3. Bowel sounds were sluggish.
4. Blood parameters shows Hb% of 11.9gm/dl with total count of 9000 cells/cumm & neutrophils of 58%.
5. USG shows free fluid at RIF & POD with probe tenderness giving rise to impression of acute appendicitis.
6. Chest X ray was normal

HISTOPATHOLOGY REPORT:
1. Macroscopy:- External surface-shows grey brown nodule measuring 1cm
2. Cut surface-Sessile polyoidal growth seen measuring 1.5cm that’s solid & hemorrhagic.
   o Microscopy:- Submucosa shows cavernous vessels filled with blood extending through muscle layer.
3. Sections from appendix show chronic appendicitis.

OPERATIVE FINDINGS:
1. Under spinal anaesthesia standard McBurney's incision was made & abdomen opened in layers.
2. Blood tinged free fluid was present inside the peritoneal cavity.
3. Appendix was retrocecal, long & slender with an adherent band at tip joining the posterior wall of the caecum.
4. After appendicectomy pelvic organs were visualized to find out the source of bleed which showed normal ovaries with significant haemorrhagic free fluid at POD.
5. Terminal ileum was visualized to confirm Meckel's diverticulum.
6. Distal ileum revealed a extramural polypoidal mass, firm in consistency & non pulsatile measuring 3*3cm about 30cm from ileo-cecal junction which bleeds on touch.
7. No mesenteric lymph node enlargement.
8. The polypoidal mass was excised from the terminal ileum with a margin of 5cm on either sides.
9. Abdomen was closed in layers after putting a suction drain.
10. Postoperative recovery was uneventful.

DISCUSSION:

1. Gastrointestinal cavernous hemangiomas are rare benign vascular tumor which presents with bleeding PR.
2. They can be solitary or multiple.
3. Sometimes the bleeding can be life threatening.
4. Only few cases have been reported in the literature of small intestinal hemangiomas presenting with bleeding inside the peritoneal cavity.
5. Most of them can develop intussusception / obstruction & rarely perforation.
6. Jejunum is one of the commonest sites of involvement in which the commonest is intramural.

ON TABLE PICTURE OF EXTRAMURAL HEMANGIOMA OVER ILEUM
HISTOPATHOLOGICAL SLIDES SHOWING CAVERNOUS BLOOD VESSELS

REFERENCES:
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