Nadroparin calcium

S

lleus following jejunum intramural haematoma: case report

A 53-year-old woman developed ileus following jejunum intramural haematoma while receiving anticoagulant therapy with nadroparin calcium [route and duration of treatment to reaction onset not stated].

The woman underwent nephrectomy, and was admitted 1 month later for abdominal pain and vomiting. She was receiving nadroparin calcium 5700IU×2/day for previous pulmonary embolism; heparin was suspended on admission. Her abdomen appeared distended and tender to palpation. CT scan revealed jejunal intraparietal neoformation, signs of intestinal obstruction and overdistention of the proximal loops. Laboratory investigations showed a decrease in haemoglobin level, an increase in reticulocytes and increases in ALT and LDH levels.

The woman underwent surgery, which revealed widespread adhesions and a jejunal loop obstructed by a voluminous intramural haematoma. Serous haematic fluid was aspirated, and resection and anastomosis were performed. Histology revealed a haemorrhagic area measuring 4.5 by 2.5cm covered with necrotic mucosa, as well as multiple clots in a segment of the epiploon. She had a normal postoperative course apart from a further transient decline in her haemoglobin level. She started receiving reviparin sodium on postoperative day 6, and was subsequently discharged in good condition.

Author comment: "We report a case of a woman receiving heparin in massive doses for pulmonary embolism, which caused the onset of a spontaneous intramural hematoma of the jejunum with a clinical picture of intestinal obstruction."

Spinelli G, et al. Ileus following spontaneous jejunum intramural hematoma: case report and review of the literature. Acta Clinica Croatica 51: 435-9, No. 3, Sep 2012 - Italy