

**Calcium polystyrene sulfonate****S****Abdominal sepsis secondary to ileus: case report**

A 62-year-old man developed abdominal sepsis secondary to ileus following the nasogastric administration of calcium polystyrene sulfonate for potassium removal.

The man was admitted for chronic respiratory failure after an episode of myocardial infarction. His hospital course was complicated with fever, abdominal pain and muscle guarding, and a presumed diagnosis of intra-abdominal infection was made. A non-contrast CT scan of the abdomen and the pelvis demonstrated a high-density faecal material in his small and large intestine and resultant bowel dilation, the findings were consistent with ileus. The cause of the high-density faecal material was retained calcium polystyrene sulfonate [*dosage not stated*]. The accumulation of calcium polystyrene sulfonate in the gastrointestinal tract resulted in abdominal sepsis [*time to reactions onsets not stated*].

The man was treated with aggressive laxatives which improved his constipation and ileus. His fever subsided after the treatment with IV antibiotics.

**Author comment:** *"In this case, calcium polystyrene sulfonate via nasogastric tube was diffusely retained in the gastrointestinal tract, causing severe ileus and resultant abdominal sepsis".*

Keng L-T, et al. Unusual ileus due to calcium polystyrene sulfonate. Postgraduate Medical Journal 92: 563, No. 1091, Sep 2016. Available from: URL: <http://doi.org/10.1136/postgradmedj-2016-134107> - Taiwan

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