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Imaging aspect of neuromyelitis optica: a case report and review of the literature

The case report presents a neuromyelitis optica in a 19 years old male. Brain and spinal cord MRI showed bilateral optic neuropathy, multiphasic demyelinating process involving the cervical and thoracic spinal cord. Cerebrospinal fluid showed negative NMO Ig G. We will describe the radiological aspect of neuromyelitis optica with a review of the literature.

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Vaginal cervicoisthmic cerclage for cervical incompetence in pregnant women: Fernandez's technique in 8 steps

Video objective: To demonstrate that surgical technique of vaginal cervicoisthmic cerclage must be performed in women with history of cervical incompetence with more than two late miscarriages before 24 weeks or premature deliveries before 28 weeks and after prior failure of preventive Mc Donald cerclage. In this video, the authors describe the complete procedure in 8 steps to standardize and facilitate the procedure in a simple and safe way during pregnancy.

Design: Step-by-step video demonstration of the surgical technique.

Setting: Tertiary Center for University Hospital.

Case Report Published Date:-2021-11-10 14:36:46

An unusual clonal chromosome abnormality der(17)t(11;17)(q24;p13)inv(11)(q13;q23) in a patient with chronic lymphocytic leukemia

Chronic Lymphocytic Leukemia (CLL) is a common clonal neoplasm of small, mature B-lymphocytes. CLL is a heterogeneous disease with different clinical presentation, response to treatment and survival. This heterogeneity could be explained by the different genetic aberrations in CLL [1]. The most important chromosomal defects correlated to a poor prognosis are 17p13.1 deletion (loss of TP53) or 11q22.3 deletion (loss of ATM) [1,2]. In the era of new drugs in CLL it is mandatory to perform the interphase fluorescence in situ hybridization (FISH) test in order to assess these aberrations, before starting any lines of therapy [3]. Moreover, recent evidence suggests that complex karyotype (CK) with structural chromosomal aberrations identified by using chromosome-banding analysis may be relevant to better define CLL prognosis. It is known that 80% of CLL patients harbor at cytogenetic aberrations [3].

Clinical Image Published Date:-2021-10-19 10:04:23

Surgical management of splenic tuberculosis with pleural fistulation in a COVID-19 patient

A 38-year-old woman with no past medical history presented to the emergency room with dyspnea, fever and upper left abdominal pain.

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Blunt abdominal trauma with duodenal dissection: A case report

We describe a new case of duodenal wound with complete transection in a 22-year-old patient following a motorcycle accident. He presented to the emergency room of the rural Regional Hospital of Edéa in Cameroon with a clinical picture of acute abdomen and post-trauma hemodynamic instability. A peritoneal puncture brought back an incoagulable blood. An exploratory laparotomy revealed a large hemoperitoneum mixed with food debris. A tear of the omentum and transverse mesocolon and a complete section of the third duodenum at the beginning of its free portion were observed. The surgeon performed emergency closure of both duodenal stumps and performed an isoperistaltic lateral gastrojejunal bypass. A transfer to a specialized center for a more anatomical continuity was considered, but the imminence of a humanitarian mission in the hospital prompted the surgeon to seize the opportunity of this mission for the reoperation. This surgical revision was performed on the fifth postoperative day. A resection of the distal duodenal stump and the adjacent jejunal segment including the anastomosis was performed. Continuity was restored by a mechanical duodenal-jejunal anastomosis. The patient was discharged on the 18th postoperative day. This type of lesion is difficult to manage in an emergency situation in a structure with limited technical resources. Unfortunately, surgeons treating polytraumatized civilians are encountering an increasing number of blunt duodenal wounds requiring laborious management.

Case Report Published Date:-2021-07-16 00:00:00

Gallstone Ileus with associated perforated small bowel diverticulitis

Gallstone ileus is a rare complication of cholelithiasis and a type of mechanical obstruction involving impaction of a gallstone within the intestinal tract [1,2]. This entity occurs in 0.15% - 1.5% of cholelithiasis cases and < 0.1% of ileus cases overall [1]. Gallstone ileus is more common in the elderly and up to 80% - 90% of affected patients have medical comorbidities [2]. The ratio of occurrence in females to males is 3.5:1 [3].

The following report presents a case of gallstone ileus with associated perforated small bowel diverticulitis, demonstrating the importance of considering this condition as a differential diagnosis of an acute abdomen.