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SECONDARY AORTODUODENAL FISTULA

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Abstract:

Secondary aortoenteric fistula (SAF) is an uncommon but very important complication of abdominal aortic reconstruction. The complication often occurs months to years after aortic surgery. The clinical manifestation of the aortoenteric fistula is always upper gastrointestinal bleeding. Treatment of the disease is early surgical intervention. If operative treatment is not performed promptly, the mortality is high. We present a case of secondary aortoduodenal fistula found 6 years after aortic reconstructive surgery, with the clinical presentation of upper gastrointestinal bleeding. On Immediate exploratory laparotomy, proximal part of abdominal Aorta was clamped. Duodenorrhaphy and aortic reconstruction with patch graft at the proximal suture line of aortic prosthesis was performed. Fortunately there was no pus, so tissue culture was not done. The intervention was concluded with an omentoplasty in order to protect the patch graft and to separate it from duodenorrhaphy. Patient did well after the surgical management. Because of the increasing number of elective aortic aneurysm repairs in the aging population, it is likely that more patients with secondary aortoenteric fistula will present to the clinical physicians in the future. So, a high index of suspicion is necessary for prompt diagnosis and treatment of this actually life threatening event.

Keywords:

Secondary aortoenteric fistula , Abdominal aortic reconstruction , Upper gastrointestinal bleeding

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