A CASE REPORT OF

GENERATIONAL BURDEN OF MULTIPLE AND RECURRENT INFLAMMATORY FIBROID POLYPS IN THE SMALL INTESTINE: A RARE CASE OF RECURRENT INTUSSUSCEPTION CAUSING BOWEL OBSTRUCTION ACROSS TWO GENERATIONS IN A FILIPINO FAMILY DUE TO DEVON POLYPOSIS SYNDROME

DR. DIANA ELOMINA
DR. RAY SARMIENTO
DR. ILEANA SYLIANGCO

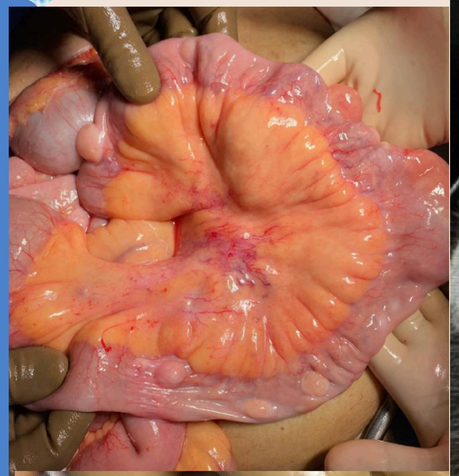
ASIAN INSTITUTE OF SURGERY
Surgical Excellence, Compassionate Care

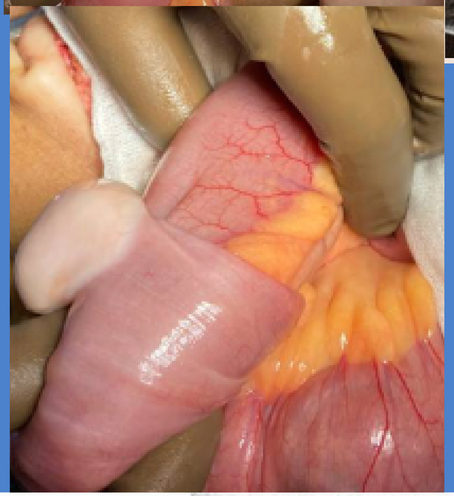
CASE PRESENTATION

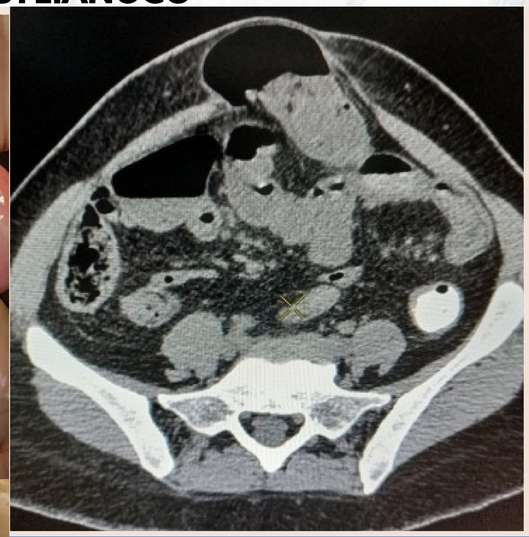
This is a case of a 47 year old, female who presented with small bowel obstruction secondary to intussusception due to recurrent and multiple inflammatory fibroid polyps. She underwent multiple surgeries and multiple segmental small bowel resection and anastomosis.

The patient underwent Exploratory Laparotomy, Enterolysis, Segmental Jejunal Resection with side to side anastomosis, Segmental Jejunal Resection with End to End anastomosis, Segmental Ileal Resection with side to side anastomosis. Noted 8 x 7 cm white round well circumscribed firm subserosal exophytic mass noted 260 cm from LOT noted intussuscepting to adjacent ileum. Multiple other lesions were also noted with similar histopathology results: Inflammatory Fibroid Polyp CD34+. Closure of the abdomen done with Component separation repair of incisional hernia.

Patient's aunt from the US also experienced the same case.







BACKGROUND AND SIGNIFICANCE OF THE STUDY

Inflammatory fibroid polyps are infrequent non-cancerous growths of uncertain origin, capable of developing on various locations along the gastrointestinal tract like the stomach and small intestine.

Inflammatory fibroid polyps (IFPs) present a perplexing challenge, particularly when they manifest in a recurrent manner, leading to grave complications such as intussusception and small bowel obstruction.

IFPs, though typically benign, can wield considerable morbidity when they recur and precipitate complications such as intussusception – a telescoping of one segment of the intestine into an adjacent segment subsequent small bowel obstruction.

This case report focuses into the compelling narrative of a patient whose journey was defined by the recurrence of IFPs, ultimately leading to recurrent exploratory laparotomies for due to small bowel obstruction emergent surgical intervention.

A similar case was reported in the same family as similar to a reported case of Devon Polyposis Syndrome in the US.

CONCLUSION

Both patients in the study, spanning two generations, presented with similar vague and prolonged abdominal pain leading to the diagnosis of small bowel obstruction requiring multiple operations and small bowel resection-anastomosis due the telescoping of multiple IFPs. Both patients were female, married, in their 40s.

Management primarily involves resection and end-to-end anastomosis of intussuscepting and obstructing lesions, with removal of large polyps that could potentially cause future obstruction. Both patients recovered and remained symptom-free for at least a year post-discharge, undergoing regular monitoring with watchful precaution for possible recurrence of abdominal symptoms.

The focus of this report primarily centers on whether the growth pattern of these lesions is mainly inherited with a chromosomal anomaly, given their occurrence in two successive generations in this study, similar to the Devon Family. Diet preferences and environmental factors were both unremarkable. Adopting a watchful waiting approach and surveillance is crucial to monitor potential recurrence of intussusception from residual polyps in the small bowel, as well as the possibility of occurrence in future generations.