

## Two jejuno-jejunal intussusceptions in a patient with coeliac disease

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### Abstract

We present a case of a 41-year-old woman with severe abdominal pain caused by two jejuno-jejunal intussusceptions. Further investigation showed coeliac disease as the underlying cause. The patient recovered rapidly on a gluten-free diet.

So coeliac disease could be the underlying cause of idiopathic intussusception more often than previously thought and intussusception should be suspected in patients with known coeliac disease presenting with abdominal pain. (*Acta gastroenterol. belg.*, 2016, 79, 000-000).

**Key words** : intussusceptions, coeliac disease, gluten-free, villous atrophy

### Short relevant history

A 41-year-old caucasian woman was admitted to the emergency unit with diffuse abdominal pain, vomiting and weight loss since fourteen days.

On physical examination she had diffuse abdominal pain without rebound, there was no fever, and there were normal vital signs.

Standard blood analyses showed only iron deficiency anemia. A multi-slice abdominal computed tomography revealed two jejuno-jejunal intussusceptions (fig. 1). Because in 70-90% of adult cases an intussusception is linked to an underlying pathology, further investigation was necessary.

### Answer

Transglutaminase and antigliadine antibodies IgA and IgG were strongly positive. A gastroduodenoscopy showed villous atrophy of the duodenum.

Duodenal biopsies diagnosed coeliac disease with subtotal villous atrophy, crypt hyperplasia and mucosal inflammation (Marsh 3c) (fig. 2). A magnetic resonance imaging of the abdomen and a PET-CT could rule out other causes of intussusceptions.

The symptoms of the patient disappeared rapidly on a strict gluten-free diet; and she remained symptom free in the follow up the next 6 months.

This demonstrates that coeliac disease could be the underlying cause of idiopathic intussusception more often than previously thought and that intussusception should be suspected in patients with known coeliac disease presenting with abdominal pain (1).

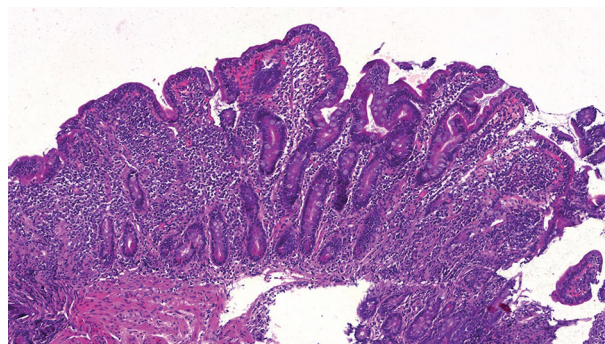


Fig. 1. — Multi-slice abdominal computed tomography revealing two jejuno-jejunal intussusceptions.



Fig. 2. — Duodenal biopsies showing subtotal villous atrophy, crypt hyperplasia and infiltration of lymphocytes.

### Reference

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