

Clinical Image

Paediatric Post-Operative Jejunio-Jejunal Intussusception- A Rare Primary Presentation of Peutz-Jegher's Syndrome (PJS)

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A 12-year-old girl had left pyelolithotomy with Y-V pyeloplasty. Initial post-operative period was uneventful. On 4th post-operative day she developed abdominal discomfort, distention and had not opened her bowels for the 48 hours after she opened her bowels post-operatively. On the following day, she developed significant abdominal distention with two large bilious vomiting and nasogastric tube brought over 1000 ml of dark green aspirates. Abdominal radiograph showed features of proximal jejunal obstruction. In the anaesthetic room, while she was being intubated, perioral and buccal pigmentation typical of PJS was noticed (Figure 1). At exploration, a non-reducible gangrenous jejunojejunal post-operative intussusception was found due to multiple polyps in the proximal jejunum. A short segmental resection with eversion of the proximal and distal loops with resection of all the polyps was followed by end to end jejunio-jejunostomy. Histology confirmed hamartomatous poly of PJS. She was referred to gastro-enterology team for annual surveillance.



Figure 1: Perioral pigmentation on the mucocutaneous junction of oral cavity which extended on to the buccal mucous membrane.