



Meckel’s Band, A Rare Cause of Intestinal Obstruction

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Introduction :

Meckel’s diverticulum is a congenital anomaly of the gastrointestinal tract with prevalence 1-3%. It results from incomplete obliteration of the vitelline duct leading to the formation of a true diverticulum of the small intestine. The risk of the complication is 4-6%. Intestinal obstruction is one of the common presentation in adult. The most common causes are adhesion and tumours. Mesodiverticular band, as presented in this case report is a rare cause of small bowel obstruction in Meckel’s diverticulum.

Case report:

63 years old man, presented with sudden severe abdominal pain and distension, vomiting, and no bowel output for 2 days. CT scan shows long segment small bowel thickening at the proximal jejunum and distal ileum. Patient underwent exploratory laparotomy found grossly dilated small bowel from DJ till terminal ileum with Meckel’s diverticulum band at the tip of diverticulum adhere to terminal ileum serosa and mesentery (5cm from ICV). Noted internal herniation of terminal ileum underneath the Meckel’s diverticulum causing small bowel obstruction and 2mm perforation at the base of diverticulum.

The histopathology report of the specimen is perforated meckels diverticulum with gastric heterotopia with serositis.

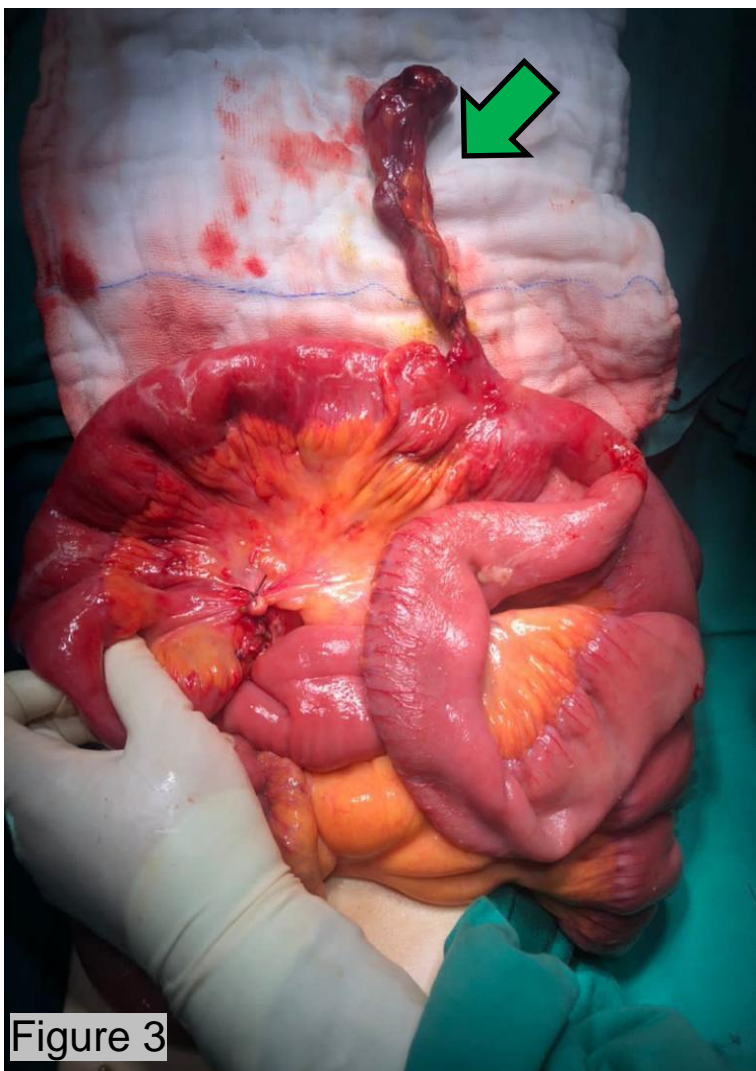
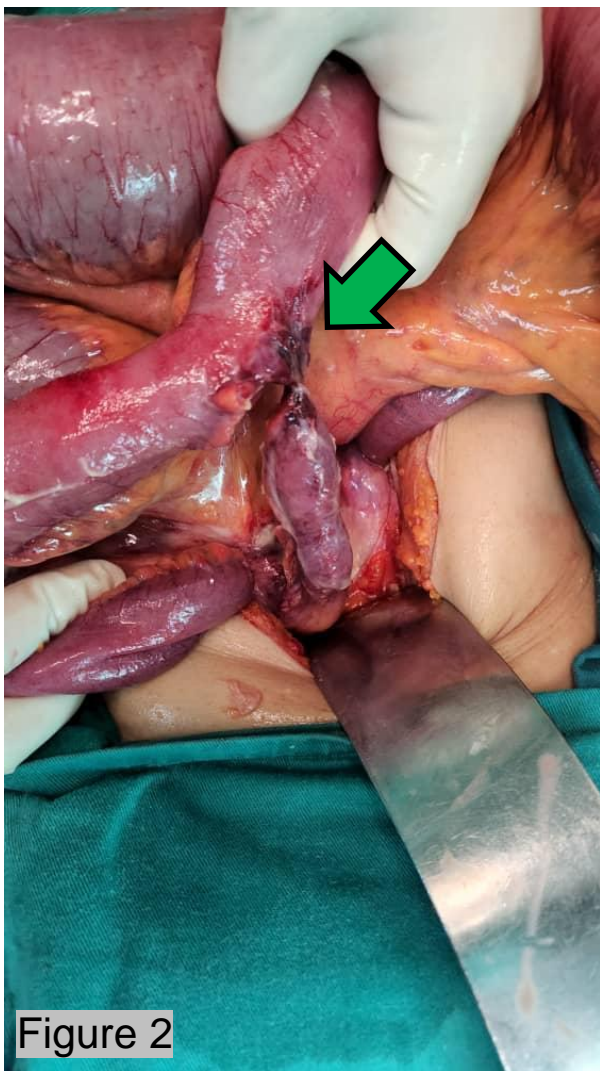


Figure 2 and 3 : Meckel’s diverticulum band at the tip of diverticulum adhere to terminal ileum serosa and mesentery (5cm from ICV) with perforation at the base of diverticulum.



Figure 1

Figure 1: CT scan shows distended small bowel with bowel wall thickening

Discussion :

Meckel’s diverticulum, an omphalomesenteric duct remnant, present 1-3% among population and only 4% may become symptomatic due to the complication. Complications include haemorrhage, intestinal obstruction, diverticulitis, perforation and peritonitis. Meckel’s diverticulum is complicated by mesodiverticular band is rarely seen, majority are asymptomatic and the diagnosis is very difficult to confirm preoperatively.

Conclusion:

Although Meckel’s diverticulum is the most prevalent congenital abnormality in gastrointestinal tract, it can be difficult to diagnose and require a higher level of suspicion. The incidence of the internal herniation cause by mesodiverticular band is rare. The complication of Meckel’s diverticulum should be taken into account in the differential diagnosis of intestinal obstruction though in adult patient.

References :

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