

Editor's Comment:

The authors report a case of small bowel diverticulum perforation (SBDP) in the acute abdomen, which has a rare prevalence. SBDPs are often discovered during exploratory laparotomy or laparoscopy for other indications or in the evaluation of chronic or acute symptoms. They arise from herniation of the mucosa and submucosa through the weakest point of the muscularispropria of the bowel wall. Perforation of inflamed diverticula is a rare event requiring immediate surgical intervention, exploratory laparotomy with resection and anastomosis. The authors reported a case of a 50-year-old woman with a perforated small bowel diverticulum. Ultrasound showed a closed bowel/diverticulum perforation with a localized collection in the peritoneum. It was decided to perform resection and anastomosis of the affected segment, which is shown in the photomicrographs of the histological material. The authors conclude that although small bowel diverticulum perforation is a rare phenomenon affecting the elderly population, this diagnosis should be considered in patients with acute abdomen. Its symptoms are nonspecific even after complications, so it should be considered as a differential diagnosis. It can be treated conservatively or surgically depending on the clinical picture. The manuscript is well written, has practical significance and can be accepted for publication.

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