

中文題目：放射性腸炎以小腸阻塞表現－病例報告

英文題目：Radiation enteritis presenting with small bowel obstruction: a case report

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Introduction:

Radiotherapy of abdominal and pelvic solid tumours may results in late intestinal toxicity. As the long-term survival of patients who received radiotherapy improves, chronic radiation enteritis as a result, is in a rising trend. Late radiation injury may take years to develop, with a median of 8-12 months before the symptoms becomes apparent. [1] Radiation enteritis could results in ileus, a serious complication that requires prompt recognition in patients who had underwent radiation therapy.

Case report:

We describe a 75-year-old woman presented with a one-month history of recurrent, intermittent postprandial nausea, vomiting and diarrhea.

The patient's medical history was notable for cervical cancer 28 years earlier and had received radiotherapy with disease remission. Plain film of the abdomen revealed small-bowel ileus (Panel A). There were no signs of free air or fluid and no indication of bowel ischemia on the computed tomography (CT) scan (Panel B). The patient was managed conservatively with nasogastric decompressions and nasogastric drainage.

In the view of lack of clinical improvement under medical management, explorative laparotomy was performed. Intraoperative findings revealed a firm consistency and edematous change of a small bowel segment, measuring approximately 100cm in length and terminal ileum stricture. Adhesiolysis with small bowel resection and primary anastomosis were performed. The surgical specimen reported changes consistent with radiation enteritis. The postoperative course was uneventful.

Discussions

Radiation-induced bowel obstruction is associated with high mortality. [1] The management of these patients remains controversial. Surgery is justified in selected patients who developed bowel obstruction or fistula from radiation injury. [2] [3]

Surgical management should not be postponed in fear of postoperative complications. [4] As expanding role of radiation therapy in the treatment of



oncological disease, clinicians should have increase awareness to the possible undesirable complications resulting from radiation therapy.

Panel A

Panel B

References:

1. Theis, V.S., et al., *Chronic radiation enteritis*. Clin Oncol (R Coll Radiol), 2010. **22**(1): p. 70-83.
2. Tsai, M.S. and J.T. Liang, *Surgery is justified in patients with bowel obstruction due to radiation therapy*. J Gastrointest Surg, 2006. **10**(4): p. 575-82.
3. Zhu, W., et al., *A retrospective study of surgical treatment of chronic radiation enteritis*. J Surg Oncol, 2012. **105**(7): p. 632-6.
4. Ruiz-Tovar, J., et al., *Late gastrointestinal complications after pelvic radiotherapy: radiation enteritis*. Clin Transl Oncol, 2009. **11**(8): p. 539-43.