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Laparoscopic management of rare case of mesentericoaxial gastric volvulus

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Gastric volvulus is an uncommon condition. It occurs mainly as a result of congenital laxity of the stomach's attachments and might be accompanied by a diaphragmatic hernia. This sometimes causes the stomach to herniate into the thorax. It can be mesentericoaxial or organoaxial, former being rarer. We present our 2 patients who were managed with minimal invasive surgery. We managed two patients with gastric volvulus, both had mesentericoaxial gastric volvulus. One of the patient also had diaphragmatic hernia in which repair was done with mesh hernioplasty. Both patients recovered well from surgery. The average hospital stay was 3 days. Mesentericoaxial gastric volvulus is a rare disease and very few cases have been reported in the literature and there are combined endoscopic and laparoscopic approaches for treatment. In secondary volvulus, the diaphragmatic defect has to be repaired, preferably with mesh. Gastropexy is performed in all cases. Even though worldwide experience in laparoscopic surgery for gastric volvulus is limited, the results are encouraging. Based on our experience, laparoscopic management seems to be safe and feasible in the rare case of mesentericoaxial gastric volvulus.

Biography

Sumita A Jain is a Senior Professor and Head of Surgical Unit in the Department of Surgery at Sawai Man Singh Medical College and Hospital, Jaipur, India. She is the Founder of Women Oncology and Healthcare Clinic in her hospital. She is also the President of an NGO, Women's Cancer Society. She is the co-author of World Society of Emergency Surgery- Sepsis Severity Score. She has also co-authored many publications in leading journals and is Principal Investigator in multiple research trials in the field of women cancer.

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