

The Influence of CT Scan in the Treatment Decision in Adhesive Small Bowel Obstruction.

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Background

- Computed tomography (CT) is diagnostic tool that potentially improve the diagnosis of bowel obstruction.
- Provides better information about etiology, site, grade of obstruction, complications and the presence of bowel ischemia.



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Small Bowel Obstruction—Who Needs an Operation? A Multivariate Prediction Model

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Conclusions: Clinical, laboratory, and radiographic factors should be considered in decision about treatment of SBO. Intraperitoneal free fluid, mesenteric edema, lack of the “small bowel feces sign,” history of vomiting are predictive of requiring operative intervention.



Objective

- The aim of the present study is to determine the influence of CT scan on management of patients with unresolved small bowel obstruction (SBO).



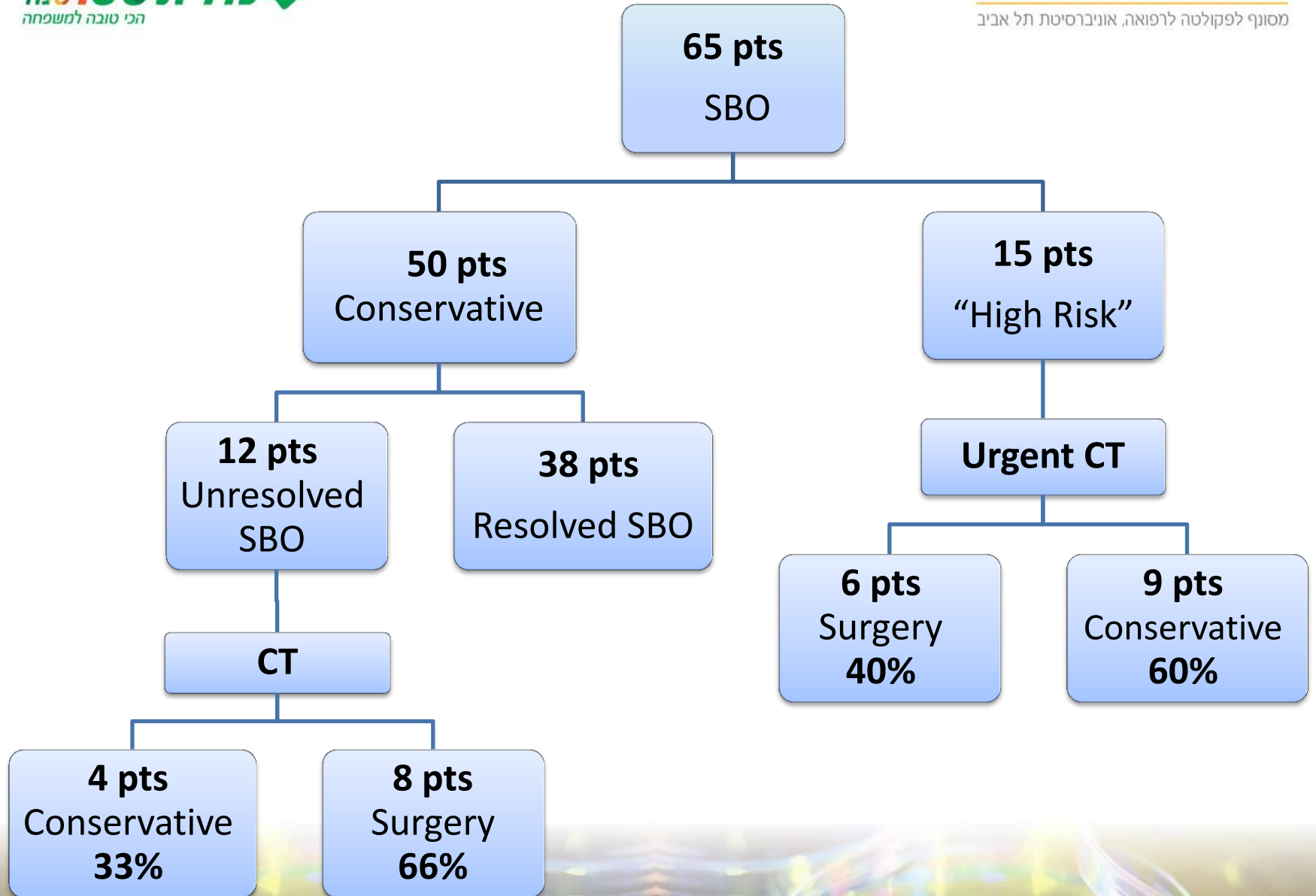
Methods

- Retrospective review of patients treated in our institution between Jan 2014 and Dec 2014 with SBO and a history of previous abdominal surgery who underwent Abdominal CT scans.
- CT was performed immediately after admission, when complications were suspected or after clinically unresolved SBO.
- Data was collected from patient files and from radiological data centre.



- Recorded:
 - Timing of CT scan.
 - “Risk factors” on CT scan.
 - Changes of the treatment strategy from conservative to surgical approach following CT scans.





Conclusions

- CT scan is a valuable diagnostic tool in the evaluation of patients with adhesive intestinal obstruction.
- CT prevented surgery in 33% of patients who initially failed conservative treatment.
- CT prevented immediate surgery in 60% of patient with a confusing initial clinical picture or suspected complicated SBO.

