



Unusual cause of owel obstruction in children in East Timor

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Biography:

Raimundo Dos Santos has done his graduation from Paiol Primary School in dili, the capital of Timor Leste. He was awarded a scholarship by Ausaid to Study English for Academic Purposes at University of Wollongong in 2002. He completed his MBBS at FSM. He is currently working as a General Practitioner at the Hospital Nacional Guido Valadares (HNGV) the Hospital Of Timor Leste.

Abstract

Intestinal duplication cyst is a rare condition and may be the cause of small bowel obstruction in children. In pediatric age group it should be considered as an important differential diagnosis in children who presented with recurrent abdominal pain and or recurrent obstruction. Diagnosis of duplicated intestinal cyst is clinically always difficult; therefore, definitive diagnosis may only be made at laparotomy. Gastrointestinal Duplication (GIDs) is rare congenital malformation, which can arise from mouth to the anus. May vary greatly in presentation, size, location, and symptoms.

It prevalence of 1:4500 births, predominantly in white males 2/3 of all intestinal duplication discovered in within first 2 years of life with 1/3 identified in the new born period. Due to its rarity of these lesions, they frequently present at both diagnostic and therapeutic Challenges.

Duplication of the gastrointestinal tract are cystic or tubular structures whose lumen are linked by a mucous membrane usually supported by smooth muscle and intimately associated with the alimentary tube. The histology reveals the characteristic lining of intestinal mucosa. They occur because of congenital aberration during gut development which may be found anywhere from the tongue to the lower rectum. Although they both arise from a redundant morphogenesis, the dorsal non-vitelline enteric malformation of the duplication cyst have a different embryological origin to those associated with the vitellointestinal duct (Meckel's diverticulum), and, about a half present within a month of birth and two-thirds in the first year.

The most common site is the small intestine (50%), particularly the ileum (35%) with the cystic type being more common than the tubular type. Jejunum (10% and duodenum (5%). Although rare, intestinal duplication cyst is an important differential diagnosis for recurrent abdominal pain in the pediatric age group, and rarer in adulthood.