



Cocoon abdomen –a rare presentation of abdominal Tuberculosis

Dr.M.Yahya,Dr Jasim, Dr Ameet
Indus hospital & health network karachi

Abstract

Abdomen cocoon is an unusual cause of intestinal obstruction that is generally discovered during a laparotomy procedure. The reason is mainly idiopathic; however, it can also be due to a variety of illnesses. We came across instance of abdominal cocoon as a result of intestinal tuberculosis. Because it is a rare case and radiological findings are scanty in literature these are easily missed by radiologists. Here we present two cases of abdominal cocoon which were diagnosed in our setup.

Case 1

A 26-year-old male presented with c/o high-grade fever, body aches and generalized weakness, weight loss for 9 months. CT scan abdomen showed evidence of encapsulated cocoon like small bowel loops with surrounding peritoneal thickening and enhancement. Moderate ascites was seen within the sac. Findings were suggestive of cocoon abdomen seen in abdominal tuberculosis. On the basis of clinical history and radiological findings, he was started on treatment for abdominal tuberculosis with first line Anti-TB drugs. After completing treatment for 9 months, his clinical findings had markedly improved.

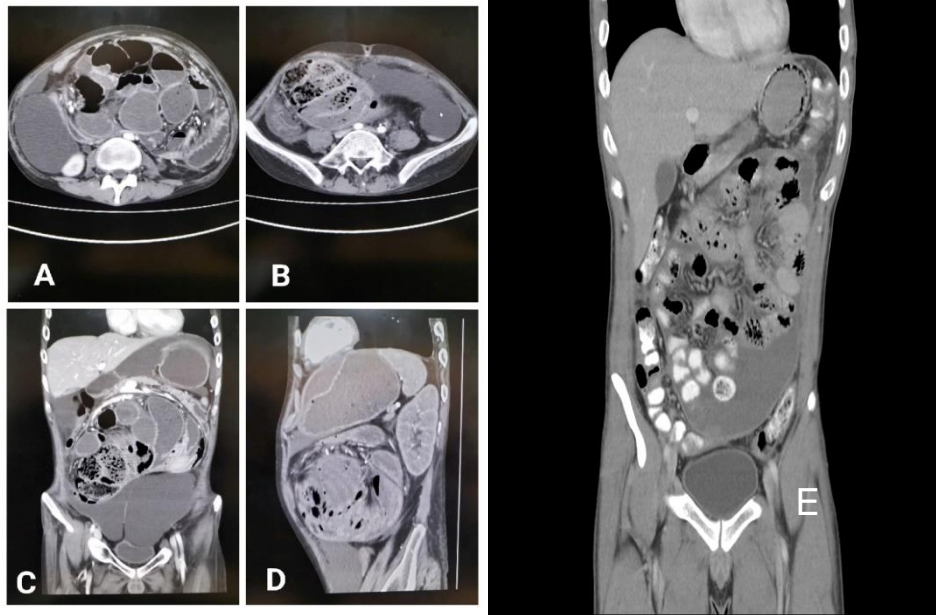


Figure A & D shows abnormal dilated small bowel loops showing air fluid levels which are encased by enhancing membrane. Figure B shows fecalization of small bowel loops. Figure C shows enhancing peritoneum and localized multiseptated fluid collection. Figure E: A coronal section of CT scan Abdomen showing cocooning of the intestinal loops.

Case discussion

Abdomen cocoon is characterized by formation of a fibrous membrane sac around small intestinal loops. It occurs commonly in young females, subtropical and tropical regions. (1) The CT findings of abdomen cocoon are mostly a concertina pattern of the arrangement of bowel loops, (2). Previously this was discovered at the time of surgery, in our one case CT solely came to be the diagnostic.

Case 2

A 20-year old male came to ER with C/O abdominal pain and distension for last 2 months. He underwent CT abdomen which showed dilated bowel loops measuring approximately 4.2 cm. Small bowel loops also appear fluid filled and small bowel fecalization also appreciated and also encased within an enhancing membrane. There is localized multiseptated fluid collection seen with mild ascites. Overall findings were in favour of Encapsulating peritoneal sclerosis. Patient underwent exploratory laparotomy confirmed the CT findings of abdominal cocoon. Adhesiolysis done to release the small bowel loops and omental bands were excised.

Conclusion

Abdominal cocoon TB is a rare type of abdominal tuberculosis that can be treated conservatively with ATT in some cases, but in non-responsive cases, surgery is required.

References:

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