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Acute Mesenteric Arterial Thrombosis in COVID-19 Disease

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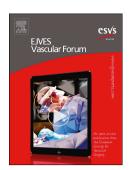
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IMAGE

Acute Mesenteric Arterial Thrombosis in COVID-19 Disease

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A 71 year old man was hospitalised for severe COVID-19 disease (lung infiltrates > 50%). The patient was on clopidogrel owing to previous transient ischaemic attacks and thromboprophylactic enoxaparin (40 mg) was administrated daily. A computed tomography performed for abdominal pain showed thrombosis of the proximal superior mesenteric artery (SMA) with ischaemia of the jejunoileal loops (A). At urgent laparotomy, a longitudinal arteriotomy of the SMA trunk identified an isolated limited thrombus (B). After thrombectomy, the incision was closed with a bovine pericardial patch. A resection of 170 cm of small bowel was performed without anastomosis. Therapeutic unfractioned intravenous heparin was started; after 48 hours a second look and a mechanical side to side isoperistaltic anastomosis were performed. After seven days, the patient developed right lower lobe segmental pulmonary embolism of multifactorial origin. The patient recovered gradually with no further events and was discharged home with oral acenocoumarol after 31 days.

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