**An Unusual Case of Acute Visceral Obstruction**

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**Background:**

Gastric volvulus is a rare cause for acute visceral obstruction. Congenital failure of gastrointestinal tract fixation is a recognised risk factor for gastric volvulus in children.

**Case Report:**

A 33 year-old woman with a rare chromosomal mutation (46,XX,del(6)(q25.1q25.3)) presented with evidence of acute visceral obstruction. Initial investigations suggested the presence of a sigmoid volvulus, however two attempts at decompression by flexible sigmoidoscopy were unsuccessful and a clinical deterioration occurred. Urgent CT imaging revealed an acute mesentero-axial gastric volvulus. At laparotomy, absence of splenic ligamentous attachments and intestinal malrotation were identified. The viscera were de-rotated, the stomach salvaged, and gastropexy and colopexy were performed.

**Discussion:**

Mesentero-axial gastric volvulus due to congenital wandering spleen has not previously been reported in an adult. Intestinal malrotation has a known association with mid-gut volvulus however it has only once been described with gastric volvulus (1).

**Key messages:**

This unique case in a rare group of patients highlights the importance that surgeons are aware that gastric volvulus associated with congenital abnormalities, such as wandering spleen and malrotation, can occur in adults. It must therefore be considered in the differential diagnosis of adults with chromosomal abnormalities who present with acute obstruction to avoid harmful diagnostic delay.

1. Dine M, Lester D. Malrotation with gastric volvulus, mid-gut volvulus and pancreatitis. American Journal of Disease in Childhood. December 1977; 131: 1345-6.