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Case Report

## A rare cause of chronic intestinal obstruction, left paraduodenal hernia: A case report

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### Abstract

Paraduodenal hernia, the most common type of internal herniation, is rare in the etiology of intestinal obstruction. Delayed diagnosis and surgical intervention may result in significant morbidity and mortality risk. This report presents a case of left paraduodenal hernia undiagnosed for a period of time resulting in intestinal obstruction. A young female patient was seen in the Surgical OPD With complaints of frequent abdominal pain which was colicky in type and more prominent about half hour after food intake. A left paraduodenal hernia was identified by MR Enterography findings of an encapsulated cluster of dilated small bowel loops occupying the left upper quadrant between the stomach and pancreas, and the presence of an engorged and displaced vascular pedicle at the orifice of the hernia. Per operatively, the proximal jejunum was found in the left paraduodenal fossa. After reducing the intestinal segments to the abdominal cavity, the orifice of the hernia sac was approximated by suturing. Paraduodenal hernia should be considered as a possible etiology in cases of chronic intestinal obstruction with unremarkable presentations. Surgeons should be familiar with the findings of imaging studies in case of a paraduodenal hernia. Early surgical intervention is critical to prevent the significant morbidity and mortality associated with this condition.

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