

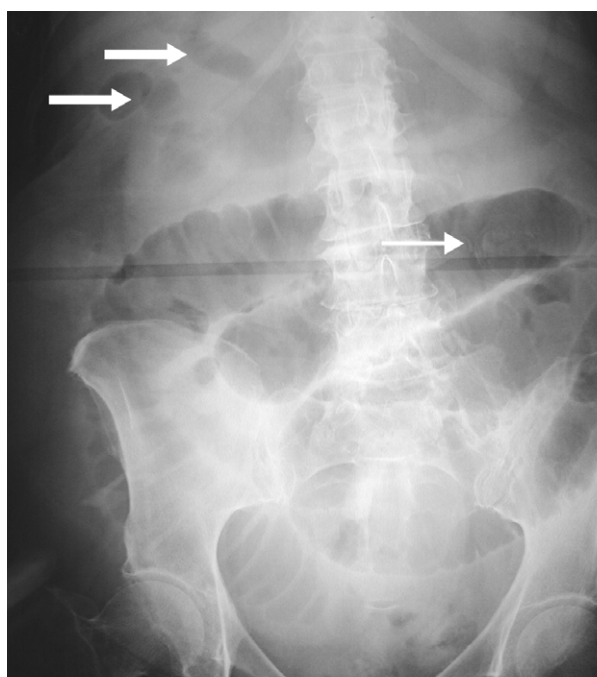
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## Clinical picture

### Gallstone ileus

Jayant S Vaidya, Olutunde Lalude, David Grant, Hasan Mukhtar

A 73-year-old woman presented with 5-day history of colicky abdominal pain, distension, vomiting, and signs of peritonism in the lower abdomen. She had no history of biliary pain. An abdominal radiograph showed dilated loops of small bowel, air in the biliary tree and gall bladder (figure, thick arrows), and a peripherally radio-opaque stone in the bowel (figure, thin arrow). We agreed on a preoperative diagnosis of gallstone ileus. At surgery the 3.5 cm solitary gallstone was found in the distal jejunum with two 5 mm perforations close to the site of impaction. These perforations were probably at the sites of two previous impactions. The closest perforation was at the mesenteric border and required resection of a small segment of jejunum. There were dense adhesions around the gall bladder, but these were left alone. Apart from a slight wound infection, the patient made an uneventful postoperative recovery.



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