

Multiple angiodysplasia diagnosed by capsule endoscopy

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Abstract: A 28-year-old Caucasian man was admitted in our unit for acute massive rectal bleeding. Past medical and family history was unremarkable. Hemoglobin was 7.6 g/dL. Blood transfusions were required. Computed tomography and gastrointestinal endoscopy were negative for active bleeding. When patient's hemoglobin was normalized and stable, a video capsule endoscopy was performed. Video relieved the presence of multiple digiunal and ileal angiodysplastic lesions. A double endoscopic argon plasma coagulation procedure was planned on general anaesthesia. Upper and rectal operative approach were performed. Procedure was uneventful. After 2 years follow-up patient had no recurrence of gastrointestinal bleeding.

Keywords: Angiodysplasia; video capsule endoscopy; argon plasma coagulation; gastrointestinal bleeding

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Informed Consent: Written informed consent was obtained from the patient for publication of this manuscript and any accompanying images.



Figure 1 Multiple angiodysplasia diagnosed by capsule endoscopy (1).

Available online: <http://www.asvide.com/articles/1354>

References

1. Diamantini G, Levi Sandri GB, Procacciante F. Multiple angiodysplasia diagnosed by capsule endoscopy. *Asvide* 2017;4:047. Available online: <http://www.asvide.com/articles/1354>

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