

◆ IMAGEN DEL NÚMERO

Solución del caso: Portal vein thrombosis in a patient with ulcerative colitis

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At the figures you can see the portal vein with many collateral vessels. The diagnosis is cavernoma of the portal vein.

The presentation of extraintestinal manifestations of inflammatory bowel diseases (IBD) (Crohn's disease and ulcerative colitis) are dominated by primary sclerosing cholangitis, arthritis, and erythema nodosum. Beside the fact that it is known for a long time, reports about complications of the inflammatory bowel diseases (IBD) caused by a hypercoagibility are rare. Different studies present an incidence of this manifestation in 1 to 6.7 percent of the patients with IBD. Some autopsy-studies found diseases caused by blood clots in correlation with IBD in up to 39 percent. Such a hypercoagibility occurs as embolism in the arterial system (e.g. stroke or myocardial infarction) or as thrombosis in the venous system. Such thrombosis are found in patients with IBD at an earlier age than expected in the normal population. They are most frequently found in the lower extremities, but some reports present locations in the mesenteric veins or in the hepatic veins (Budd-Chiari syndrome).

The knowledge of this special extaintestinal manifestation of IBD seems very important because of the consequences for the patients. So, patients with an Crohn's disease or an ulcerative colitis should be carefully and regularly examined on hints for thrombotic or embolic complications. Otherwise

there is an increased risk for the development of a stroke or a cirrhosis and such diseases lead to a higher morbidity and even mortality in people that are often young. The treatment is similar to the other embolic or thrombotic diseases and this therapy even seems to be an option or tool for the treatment of the IBD.¹⁻⁵

References

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