

SMALL BOWEL PERFORATION IN PATIENT WITH ACUTE MYELOID LEUKEMIA-CASE REPORT

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Introduction: acute leukemia not only affects the hematopoietic system directly but also involves many organs and tissues. The etiology of most leukemic gastrointestinal complications is caused by primary invasion by leukemic cells, immunodeficiency with deep neutropenia from the leukemia and antileukemic drugs. Chemotherapy may directly produce necrosis and weakened areas in the bowel wall while destroying the underlying malignant cells. Bacterial, fungal, or viral overgrowth then can invade the bowel and produce ulceration, pseudomembrane formation, or perforation. Gastrointestinal perforation and intestinal obstruction are potentially life-threatening conditions associated with high perioperative morbidity and overall mortality rates of 10% for small bowel obstruction, 5–20% for large bowel obstruction, 30% for intestinal perforation, and up to 70% for intestinal perforation with diffuse peritonitis. **Case report:** we present a 48 years old female with AML, treated with DA regimen (3+7). After second cycle she present with severe abdominal pain. Abdominal CT scan showed a distended small bowel conglomerate at the level of the ileum with an edematous appearance, as well as a surrounding fatty inflammatory reaction, and subhepatic and pelvic free fluid in addition to a change from necrotic to ischemic features. The patient was treated in operating theatre, resection of bowel and temporary stoma were performed. She is received 2 cycles Venetoclax Azacytidine and second surgery was obtained. Further treatment will be allogeneic SCT from HLA identical sister. **Conclusion:** if abdominal emergency surgery is required due to gastrointestinal perforation in patients with hematological malignancies, temporary or permanent intestinal stoma might be preferred to primary intestinal anastomosis not only to reduce the risk of septic shock due to fecal peritonitis but also to enable treatment of the underlying disease to be continued as quickly as possible. Prompt diagnosis and appropriate treatment of these entity is essential because he is associated with high morbidity and mortality.