

Closed-loop obstruction

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This occurs when the bowel is obstructed at both the proximal and distal points (Figure 78.2). The distension is principally confined to the closed loop; distension proximal to the obstructed segment is not typically marked. A classic form of closed-loop obstruction is seen in the presence of a malignant stricture of the colon with a competent ileocaecal valve (present in up to one-third of individuals). This can occur with lesions as far distally as the rectum. The inability of the distended colon to decompress itself into the small bowel results in an increase in luminal pressure, which is August Gottlieb Richter , 1742–1812, lecturer in surgery , Göttingen, Germany , described this form of hernia in 1777. Jacob Benignus Winslow , 1669–1760, Professor of Anatomy , Physic and Surgery , Paris, France. greatest at the caecum, with subsequent impairment of blood flow in the wall. Unrelieved, this results in necrosis and perforation (Figure 78.3).

(a) (b) Figure 78.2 Distension.

Closed-loop obstruction around a constrict

ing band (arrow) with impending strangulation, mild distension of the proximal limb (a) and collapse of the distal limb (b) of small bowel.

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