

# MESENTERIC ADENITIS AND THE MESENTERY IN CROHN'S D

## MESENTERIC ADENITIS AND THE MESENTERY IN CROHN'S DISEASE

Ileocaecal mesenteric adenitis occurs in ileocolic Crohn's disease and the mesentery is thickened, shortened and oedematous with a tendency to bleed readily when handled. The vascular pedicles within the mesentery may not be apparent, thus great care is needed when dividing the mesentery as normal techniques may not be suitable. In Crohn's disease, the mesentery can extend over adjoining intestine as 'fat wrapping' or 'creeping fat' ( Figure 65.12 These appear to be specific to Crohn's disease. The mesentery changes from normal to abnormal at the mesenteric transition zone. Conventional surgery for Crohn's disease involves amputation of the intestine at its intersection with adjoining mesentery. The mesentery is thus retained. Increasingly, surgeons are removing the mesentery adjoining the diseased intestine (see Chapter 75 ).

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