

Obstruction from enteric strictures

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Small bowel strictures usually occur secondary to tubercu losis or Crohn's disease. Malignant strictures associated with lymphoma are uncommon; carcinoma and sarcoma are rare.

Presentation is usually subacute or chronic. Standard surgical management consists of resection and anastomosis. Resection is important to establish a histological diagnosis as this can be uncertain clinically . In Crohn's disease, strictureplasty may be considered in the presence of short multiple strictures without active sepsis (see Chapter 75).

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