

The Uncommon Acute Abdomen: Enteropathy-Associated T-Cell Lymphoma Revealed by Jejunal Perforation

Boris Zhong DO¹, Tyson Amundsen MD¹

¹Baylor Scott & White Medical Center, Dept of Internal Medicine, Temple, Texas 76508

INTRODUCTION

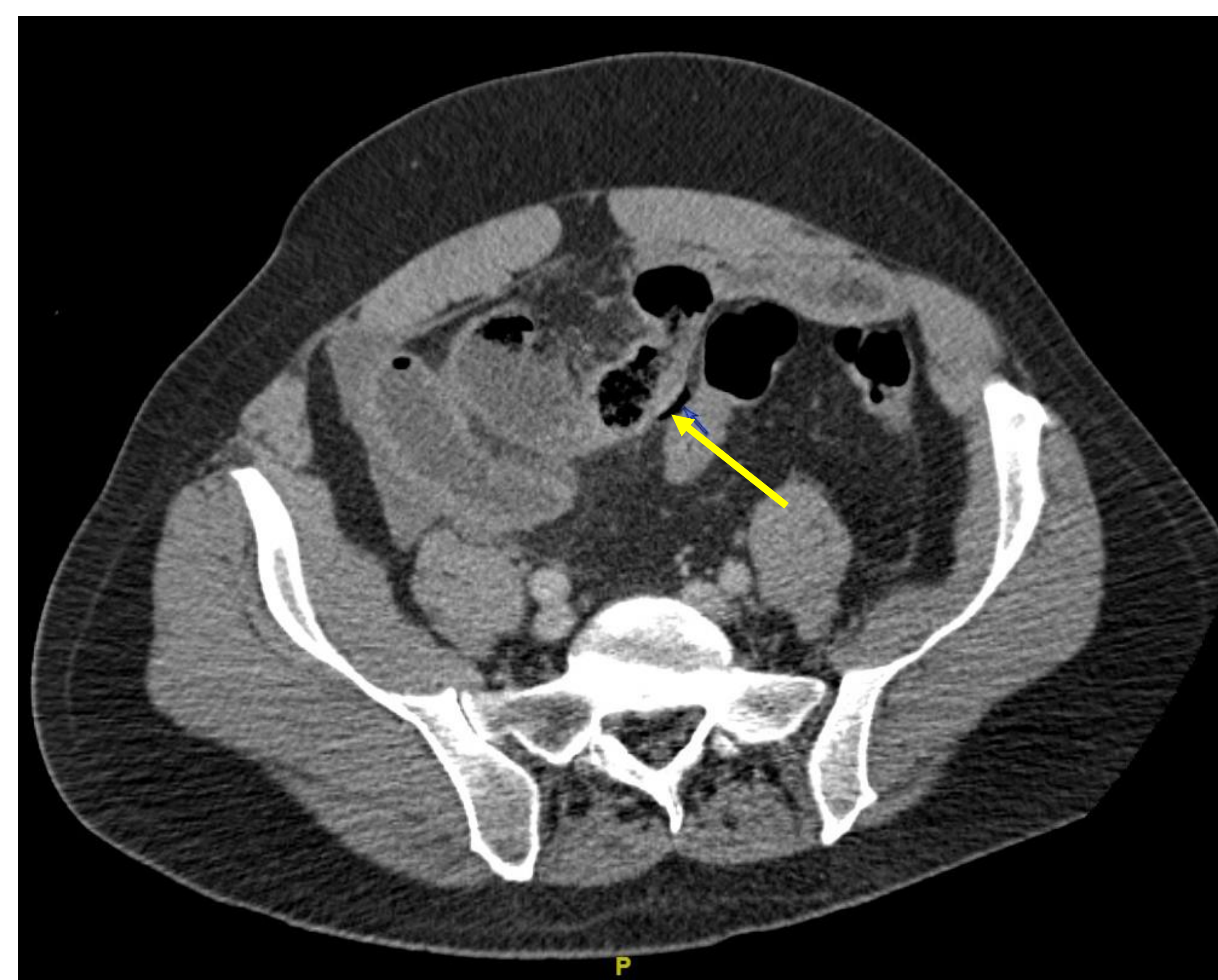
- Long-standing Celiac Disease (CD) that is untreated or refractory to gluten-free diet can have dire consequences.
- Enteropathy-associated T-cell Lymphoma is a rare (<1%) form of **non-Hodgkin's intestinal lymphoma** that carries a **poor prognosis with high mortality**.
- EATL may manifest as **complicated small bowel disease** such as **obstruction or perforation**.
- We highlight a Celiac Disease patient presenting with an acute abdomen found to have **jejunal perforation due to EATL**.

CASE PRESENTATION

- 51-year-old male with history of CD **non-compliant with gluten-free diet** and peptic ulcer disease presented with acute abdomen.
- Abdominal CT revealed **closed loop obstruction and pneumatosis with hollow viscus perforation**. Urgent ex-lap discovered large volume purulent fluid and a **perforation in the mid-jejunum** which was resected.
- Biopsy of the resected jejunum revealed **malignant lymphoid infiltrate** in a background of **mild villous blunting, increased intraepithelial lymphocytes, and ulceration**. This pathology was consistent with EATL.



Jejunal perforation (yellow arrows) see on CT A/P in Coronal and Axial views.



CASE PRESENTATION (cont.)

- T-cell receptor rearrangement study was **negative** and bone marrow biopsy showed **no involvement**.
- Initiated on **BV-CHOP** therapy by Oncology. PET/CT showed **complete remission of lymphoma after 6 cycles** of chemotherapy.
- After induction chemotherapy, patient opted for **consolidation (BEAM) chemotherapy** followed by **autologous bone marrow transplant**.
- Unfortunately, treatment course was complicated by neutropenic fever leading to septic shock and multi-organ failure. **Transitioned to comfort care**.

DISCUSSION

- Strict gluten-free diet (GFD) is the **primary prevention of EATL in CD** patients. Non-compliance significantly increases risk of developing EATL.
- Small bowel perforation is a rare, but well-documented complication of EATL that **must be recognized in any CD patient presenting with acute abdomen**.
- Current treatment of EATL with chemotherapy and autologous bone marrow transplant has shown **promising increase in survival rates**.