



Acute Abdomen after Extravasation of Parenteral Nutrition in a Preterm Neonate

Yi-Li Hung^{1,2} and Wu-Shiun Hsieh^{1,3*}

¹Department of Pediatrics, Cathay General Hospital, Taiwan

²School of Medicine, College of Medicine, Fu Jen Catholic University, Taiwan

³Department of Pediatrics, National Taiwan University College of Medicine, Taiwan

Clinical Image

A 3 weeks old preterm male infant with gestational age of 29 weeks and birth weight of 1504 gm had necrotizing enterocolitis of modified Bell's staging IIIB and received emergent laparotomy. Due to prolonged inadequate enteral nutrition and difficult intravenous catheter access, left-side femoral vein cutting down with central venous catheter insertion was performed. Total Parenteral Nutrition (TPN) including lipid infusion was provided through this catheter. Five days later, the patient became hemodynamically unstable and severe abdominal distension with abdominal wall erythema and formation of bullae was observed. Bright whitish fluid was drained from the ruptured abdominal wall bullae (Figure 1A). The drained discharge showed high glucose and triglyceride levels of 6617 mg/dL and 2001 mg/dL, respectively, which was consistent with the contents of TPN. Venogram via the femoral catheter revealed extravasation into the peritoneum (Figure 1B). Femoral catheter was immediately removed and antibiotics were continuously administered with local wound care. The acute abdomen improved rapidly within 48 hours and skin necrosis healed 2 weeks later.

OPEN ACCESS

*Correspondence:

Wu-Shiun Hsieh, Department of Pediatrics, Cathay General Hospital, National Taiwan University College of Medicine, No. 280, Sec. 4, Ren Ai Road, Taipei 10630, Taiwan, Tel: +886-2-2708-2121 (Ext: 6565); Fax: +886-2-2314-7450;

E-mail: hsiehws@ntu.edu.tw

Received Date: 13 Apr 2019

Accepted Date: 28 May 2019

Published Date: 04 Jun 2019

Citation:

Hung Y-L, Hsieh W-S. Acute Abdomen after Extravasation of Parenteral Nutrition in a Preterm Neonate. *Clin Surg.* 2019; 4: 2452.

Copyright © 2019 Wu-Shiun Hsieh.

This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

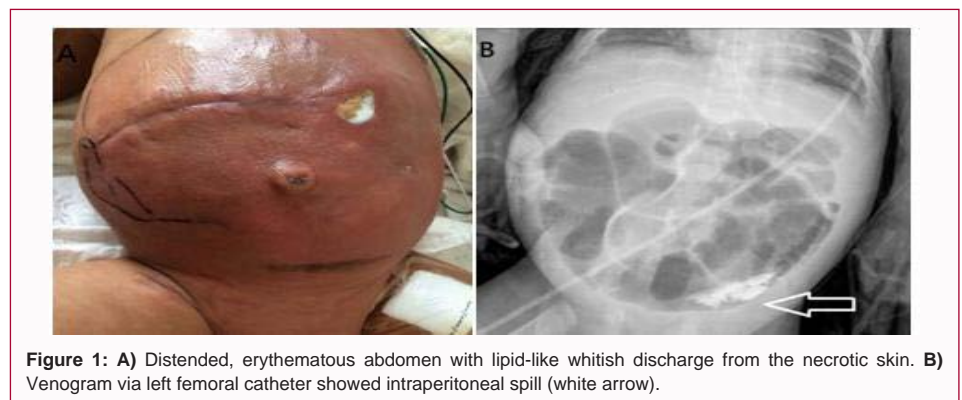


Figure 1: A) Distended, erythematous abdomen with lipid-like whitish discharge from the necrotic skin. B) Venogram via left femoral catheter showed intraperitoneal spill (white arrow).