

with minimal intervention. However, recurrence rates with medical therapy are surprisingly high (>50% in a case series of 110 patients) (Joseph and Sahn, 1996). Surgical treatment can include both video-assisted thoracoscopic surgery and/or pleurodesis, closure of fenestrations as well as laparoscopy to evaluate and treat abdominal disease. Ultimately for some patients hysterectomy and bilateral salpingo-oophorectomy may represent the best chance of cure. **BJHM**

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### LEARNING POINTS

- Thoracic endometriosis syndrome commonly involves the right hemithorax.
- Gonadotropin-releasing hormone is the most efficacious medical therapy.
- Recurrence rates are high with medical therapy alone.
- Hysterectomy and bilateral salpingo-oophorectomy may offer the best chance of cure in refractory cases.

## Images in Medicine

# Small intestinal and mesenteric lymphangioma in an adult: a rare cause of acute abdominal pain

**L**ymphangioma is a rare benign lymphatic tumour; the majority of cases present in childhood in the neck or axilla (Makni et al, 2012). It presents rarely in adults, involving the small bowel, mesentery or colon. Causes include congenital malformation of the lymphaticovenous system, trauma, surgery or lymphatic obstruction (Lee et al, 2011). The most common type is cystic: dilated lymphatic spaces filled with fluid which contains foamy macrophages (Rami et al, 2012).

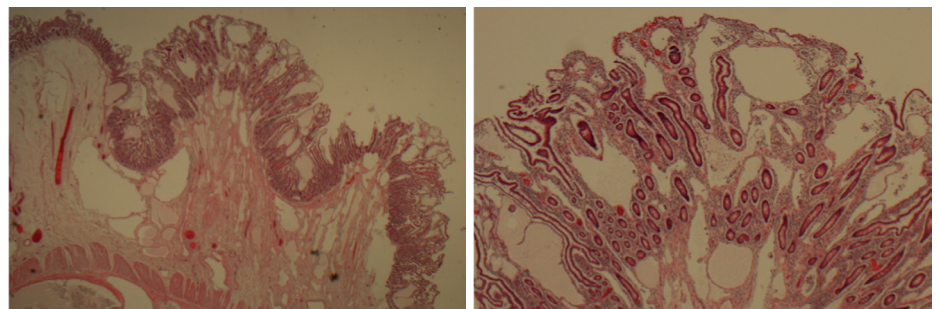
An 18-year-old man presented with a 2-day history of generalized abdominal pain; he was haemodynamically unstable

with peritonitis. Emergency laparotomy revealed small bowel obstruction with grossly abnormal jejunum and mesentery (*Figure 1*)

**Figure 1. Abnormal small bowel mesentery.**



**Figure 2. Histological examination showing abnormal lymphatic channels in the small bowel mucosa.**



(*Figure 1*). This was resected, with subsequent jejunostomy and formation of an ileal mucous fistula. Histology demonstrated small intestinal and mesenteric cystic lymphangioma with secondary infection (*Figure 2*). Three months later, a jejunocolic anastomosis was formed and he remains well.

This highlights lymphangioma as a rare but important differential diagnosis in young adults presenting with acute abdomen. **BJHM**

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