Clinical Image in Gastroenterology

Radiation enteritis diagnosed through capsule endoscopy, an uncommon cause of iron-deficiency anemia

Enteritis por radiación diagnosticada por cápsula endoscópica, una causa infrecuente de anemia ferropénica

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A 66-year-old woman was operated on in 1988 for an endometrial adenocarcinoma, after which she received adjuvant radiotherapy. The patient presented with 6-month, progressive iron-deficiency anemia. A complete endoscopic study (esophago-gastroscos-duodenoscopy and ileocolonoscopy) was performed; mucosal edema with superficial whitish spots in the terminal ileum (fig. 1A) was observed. Non-specific chronic inflammation was reported in the histology study. To evaluate extension and small bowel involvement, a video capsule endoscopy was indicated. Diffuse and continuous involvement of the mucosa from the proximal jejunum to the terminal ileum was detected. The mucosal lesions ranged from mild edema with preservation of the villous architecture in proximal segments (fig. 1B) to the presence of multiple ulcers that distorted and strictured the intestinal lumen (fig. 1C) in distal segments; the device could pass with no problems (fig. 1D). These findings were suggestive of post-radiation enteritis. Radiation enteritis is a phenomenon that appears in some patients that undergo abdominal radiotherapy. It can be acute or chronic, depending on the appearance of symptoms after treatment completion, among which the most frequent are nausea, vomiting, diarrhea, abdominal bloating, or gastrointestinal bleeding. Capsule endoscopy can be useful in these cases, and the Agile® Patency dissolvable capsule should be employed if there is suspicion or knowledge of bowel stricture.


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Conflict of interest

The authors declare that there is no conflict of interest.