Omental Necrosis Masquerading As Acute Urinary Retention Following Laparoscopic Roux en Y Gastric Bypass

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Introduction
Omental torsion is a rare cause of an acute abdomen (1). It mimics acute appendicitis and other causes of acute abdominal pain. Diagnosis has increased due to high quality imaging (2).

Clinical Details
Background
55yr old man
Elective gastric bypass for super obesity
Admission BMI of 50

Post Op Day 1
Abdominal pain and distension
Large residual volume of urine

CT Chest & Abdomen
Consolidation and pleural effusion

Clinical Impression
Anastomotic leak

Laparoscopy
Fibrinous coating over small bowel
Healthy and intact anastomosis (no air leak)
Large segment of necrotic omentum found

Management
Necrotic omentum divided and removed

Discussion
The complications in the post operative period did not provide a consistent picture to guide diagnosis.

The acute presentation of the pain and significant deterioration in a short period of time compounded the problem.

To confirm and refute the clinical suspicion early re-laparoscopy proved to be the only means to provide a diagnosis and prompt management.

Conclusion
The diagnosis of omental necrosis requires a high degree of clinical suspicion.

High quality imaging though improving diagnostic clarity is still superseded by exploratory surgery as the definitive means of diagnosis.

References
1. Salisbury CR. Omental Torsion With Unusual Symptoms. BJS 23:115-118

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