

CLOSED ABDOMINAL TRAUMA CAUSED BY BICYCLE HANDLEBARS: THE IMPORTANCE OF PERITONEAL FREE FLUID

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INTRODUCTION

Bicycle handlebar trauma victims are recurrent cases in emergencies and are among the most common causes of abdominal blunt injuries in children. For this reason, cases like this should be well evaluated and targeted for early treatment.

CASE REPORT

Patient MAFDA, 14 years old, was admitted to the emergency room with a report of a fall from a bicycle and abdominal trauma, in the hypogastrium region, with handlebars. During the first consultation, she reported pain at the trauma site associated with nausea and vomiting. The patient was hemodynamically stable, with no signs of shock. On abdominal examination, she had a handlebar tattoo associated with pain on deep palpation. Tomography was performed with evidence of free perihepatic fluid, gutters and pelvis. Chosen to perform exploratory laparotomy. In the intraoperative period, a moderate amount of enteric fluid was observed and a point of complete section of the jejunum loop was 100 cm from the Treitz angle. Enterectomy was performed with primary manual anastomosis associated with cavity washing. There was no evidence of other lesions, either in massive

or hollow viscera. The patient evolved well in the immediate postoperative period with a liquid test diet on D3, a complete diet on D4 and a soft diet on D5 after hospitalization. After 6 days of hospitalization, the patient was discharged from the hospital and followed up on an outpatient basis without complications.

DISCUSSION

The delay in diagnosing viscera lesions in these patients is due to the fact that most of the lesions do not cause major bleeding or do not evolve rapidly with peritonitis due to the enteric content having a neutral pH, low bacterial density and low enzymatic activity. Tomographic evaluation becomes essential and the presence of free fluid becomes the most sensitive finding. The literature shows that in exams where massive organ damage is not detected, free fluid becomes less sensitive but more specific for damage to hollow viscera. It is evident that early decision-making by the surgeon affects the patient's morbidity and mortality, for this reason, being attentive to physical and radiological signs becomes essential. In this sense, the early indication of surgery for the patient acted directly on the good outcome of the case.

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