

Kazakh National Agrarian University

Enterectomy

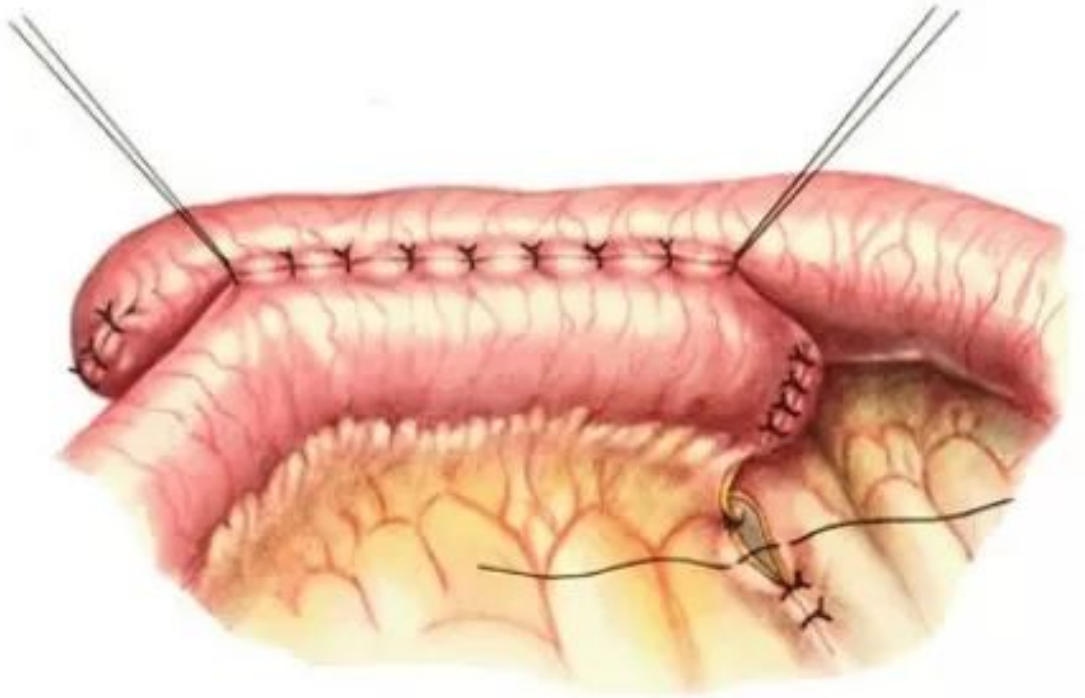
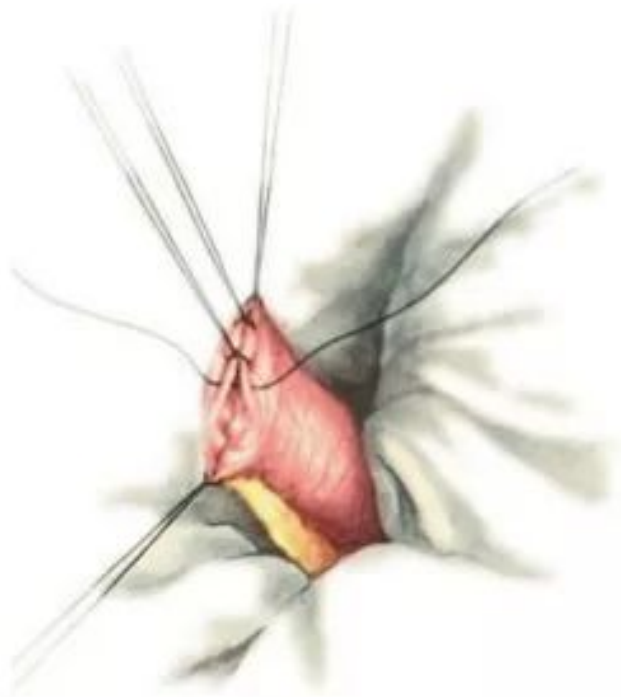
*Performed: Abzabekov. A.
VM-409
Checked: Zhakipbekova. A.*

Enterectomy (enter- + -ectomy) is a surgical procedure in which a part of an intestine (bowel) is removed, from either the small intestine or large intestine. Often the word enterectomy is reserved for the sense of small bowel resection, in distinction from colectomy, which covers the sense of large bowel resection.



Bowel resection may be performed to treat gastrointestinal cancer, bowel necrosis, severe enteritis, diverticular disease, Crohn's disease, endometriosis, ulcerative colitis, or bowel obstruction due to scar tissue.

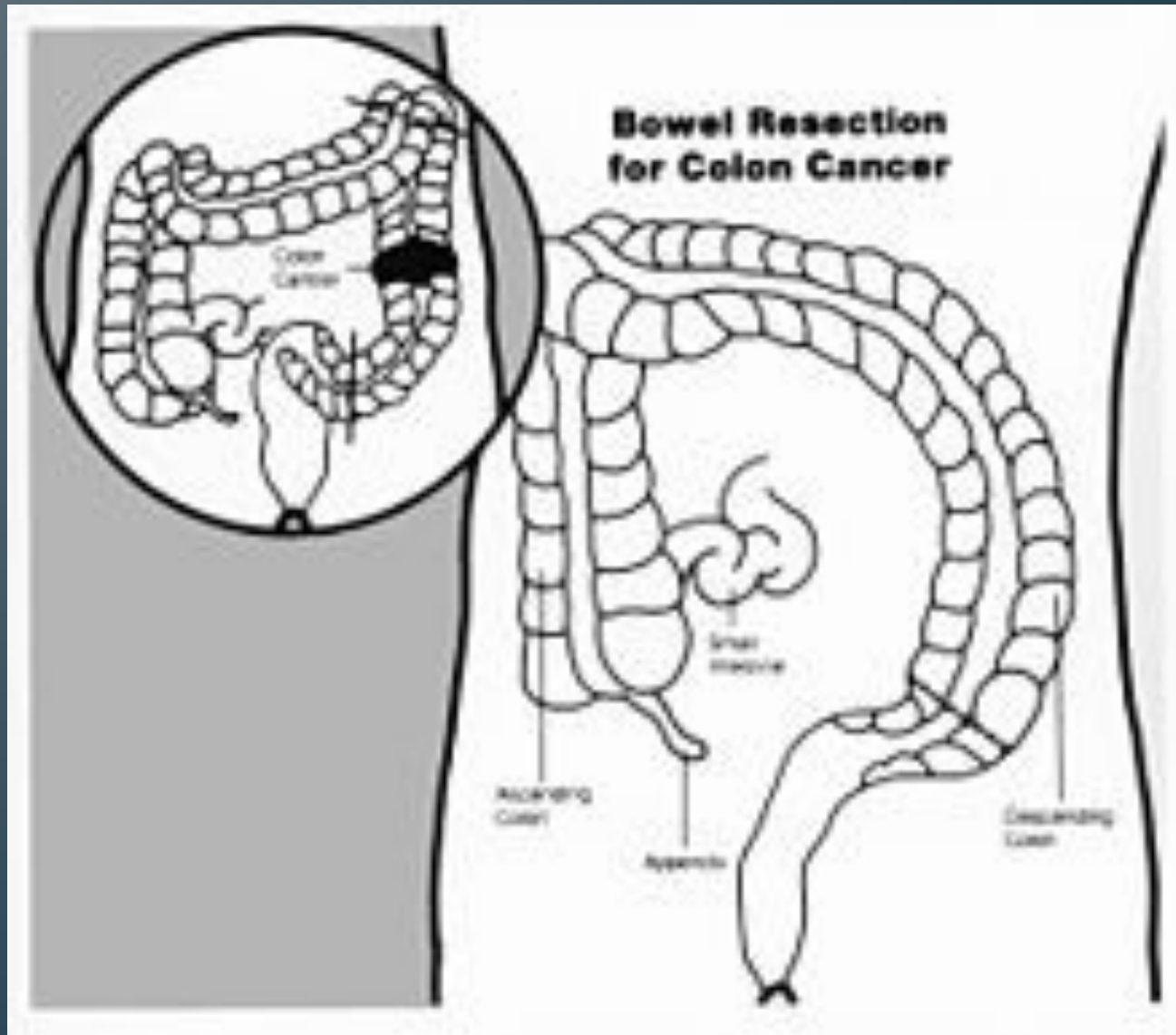
Other reasons to perform bowel resection include traumatic injuries and to remove polyps when polypectomy is insufficient, either to prevent polyps from ever becoming cancerous or because they are causing or threatening bowel obstruction, such as in familial adenomatous polyposis, Peutz–Jeghers syndrome, or other polyposis syndromes.



Depending on which part and how much of the intestines are removed, there may be digestive and metabolic challenges afterward, such as short bowel syndrome.

Procedure	Bowel segment
duodenectomy	duodenum
jejunectomy	jejunum
ileectomy	ileum
colectomy	colon

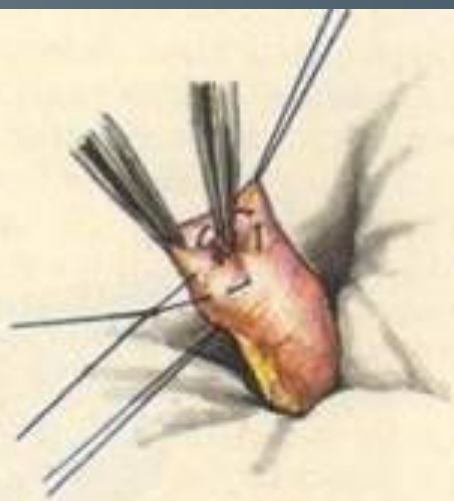
Drawing showing bowel resection for colon cancer



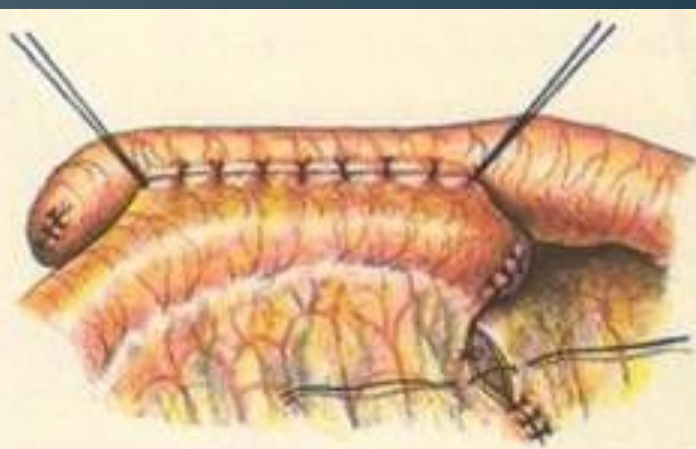
The most frequent reasons for interventions on the intestine become of the tumor and mesenteric thrombosis. In the first case, the operation is rarely carried out urgently, usually with the detection of cancer is a necessary preparation for the forthcoming operation, which may include chemotherapy and radiation, so from the time of detection of pathology before the intervention takes some time.

Mesenteric thrombosis requires urgent surgical treatment, as rapidly increasing ischemia and necrosis of the intestinal wall and cause severe intoxication, threatened with peritonitis and death of the patient. Time to prepare, and on a careful diagnosis, there is little, it affects the final result.

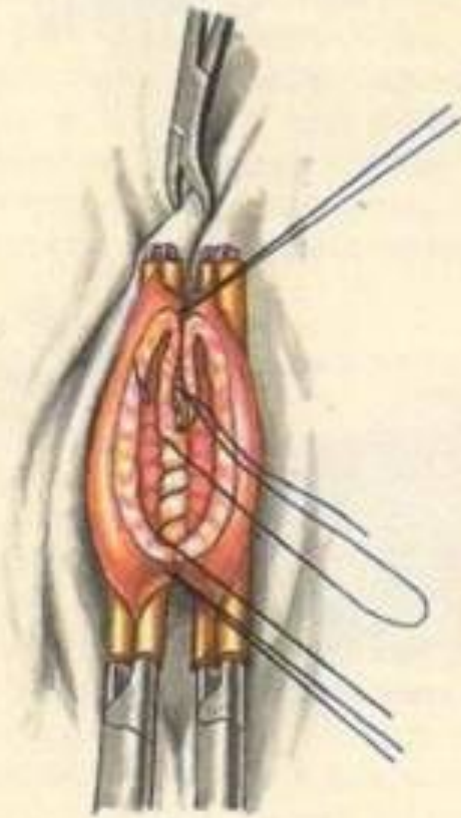
Intussusception when one portion of the intestine is embedded within another, leading to bowel obstruction, nodulation, congenital malformation – scope of the interest of children's abdominal surgeons, as it is in children, this pathology is the most common.



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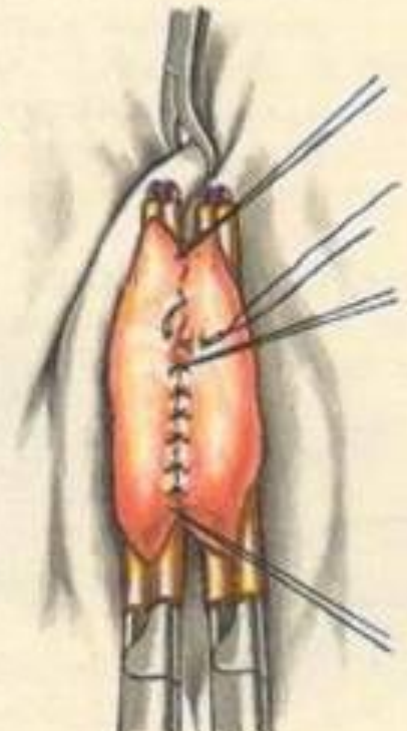
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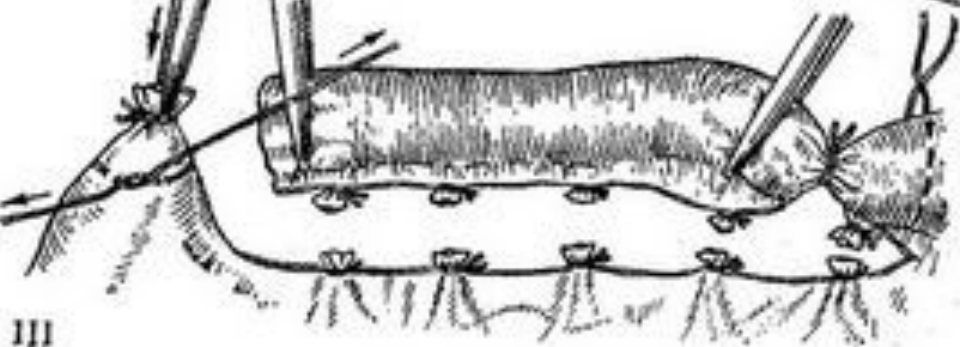
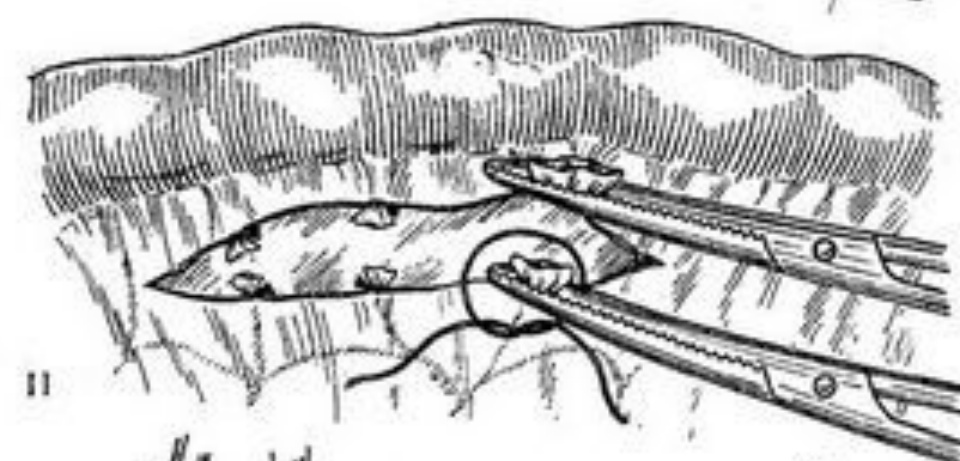
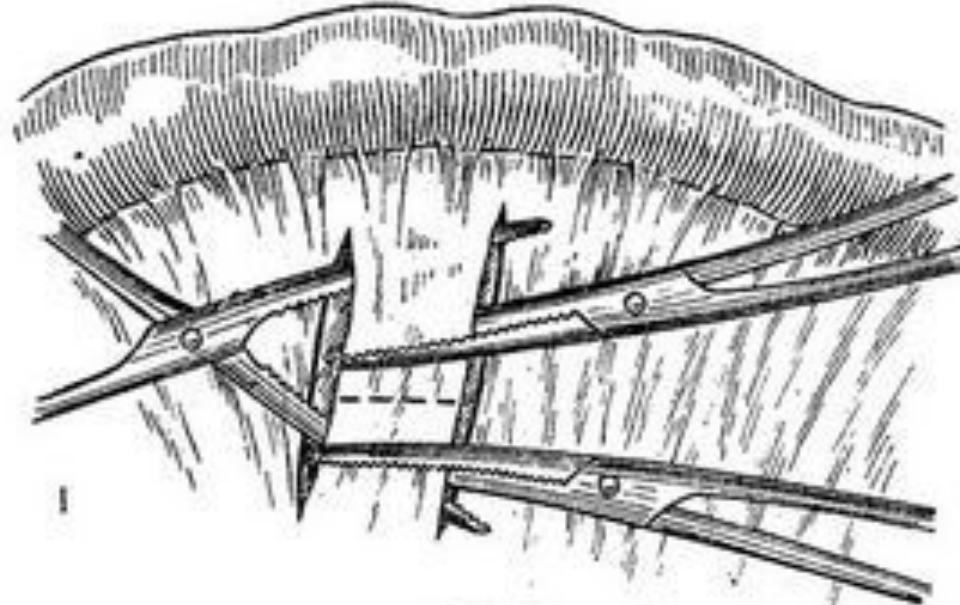
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Thus, the indications for bowel resection may be:

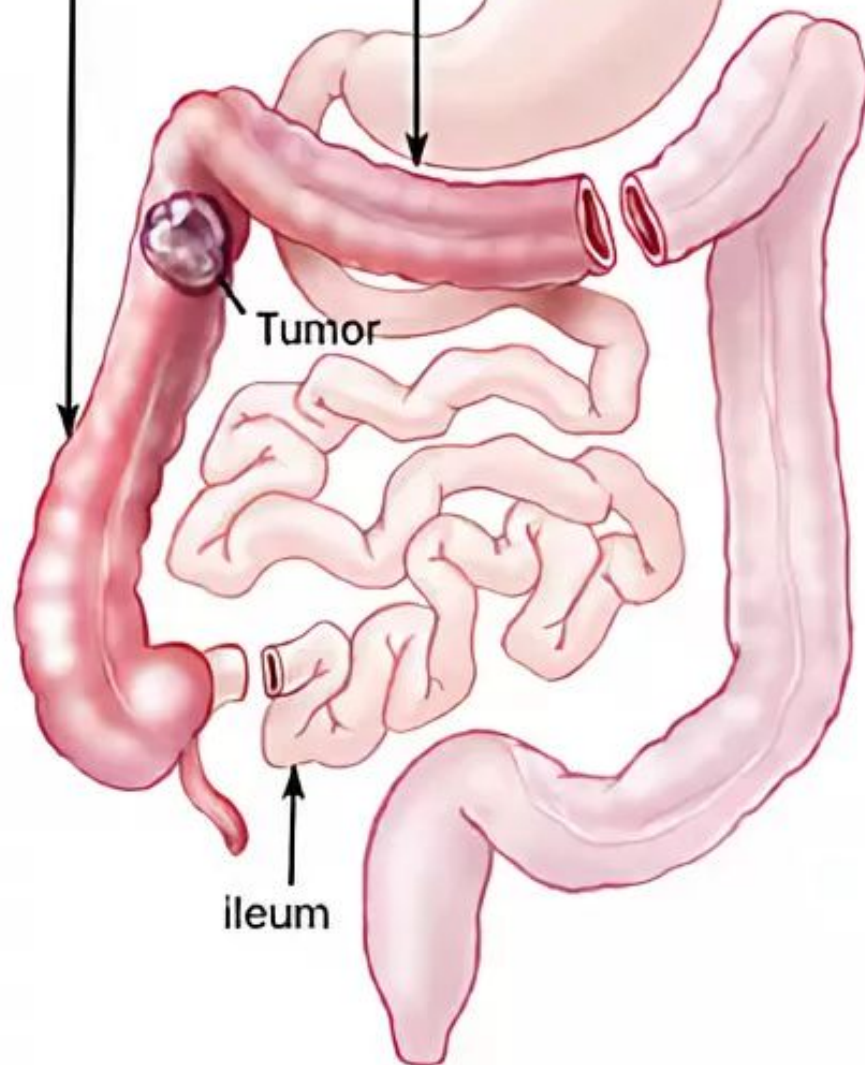
- **Benign and malignant tumors;**
- **Gangrene (necrosis) of the bowel;**
- **Intestinal obstruction;**
- **Severe adhesive disease;**
- **Congenital abnormalities of the intestines;**
- **Diverticulitis;**
- **Nodulation ("inversion"), intussusception of the intestine.**



Resection of the small intestine most often done because of necrosis. The main type of blood supply when the blood to the body is one large vessel, further branching into smaller branches, explains a significant extent of the gangrene.

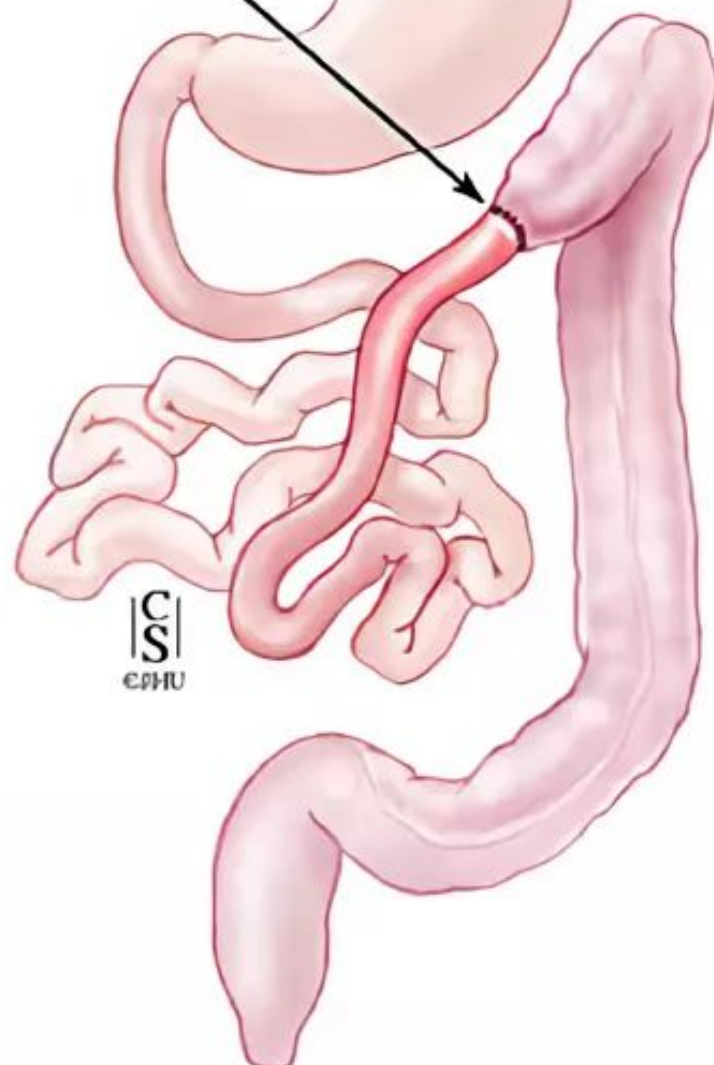
This happens with atherosclerosis of the superior mesenteric artery, and the surgeon in this case is forced to excise a large portion of the colon.

A Right colon and portion of transverse colon removed



B

Ileocolic anastomosis



Methodology resection:

- ***the open method in which the fully cut the cavity of the abdomen;***
- ***laparoscopic surgery, which makes several small incisions, they spend the necessary tools, lights and cameras.***

Laparoscopy is a newer type of surgery that doesn't leave a big scar, less risk of entering different kinds of infections, postoperative period under the supervision of a physician in short, the process of recovery faster and less painful.

Steps:

- ***Enter General anesthesia, you are connecting the patient to the infusion, through which the introduced sedative.***
- ***In the stomach the needle is injected, by means of which it let in carbon dioxide. As a result, the abdomen swells and is easier to carry out the procedure.***
- ***Stomach make up to 6 small incisions. Into one hole introduce a laparoscope (camera with flashlight), other tools are introduced as needed (scissors, clamps and others).***
- ***Site is cut off diseased small intestine, after which the two formed an end stitch or connect the straps. Removed the small intestine is applied to the clips for the rest — sutures-holders.***
- ***The site of the incision smeared with Odonata.***
- ***Sometimes you need to completely sew up the body, so that through him could pass the food, in this case, make the stoma (the part of the intestine taken out and attached a colostomy bag). Then spend the additional interference and sew everything right.***
- ***Retrieves all instruments, carbon dioxide is pumped out. Incisions be closed with stitches and bandage.***

**thank you
for
attention**