

**SUPERIOR MESENTERIC ARTERY SYNDROME IN TWO FEMALE ADOLESCENTS.
CASE REPORT**

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Introduction: Superior mesenteric artery syndrome (SMA) is a rare cause of gastrointestinal obstruction and its non-specific symptoms often lead to underdiagnosis.

Purpose: To present two cases of female adolescents with abdominal pain diagnosed with SMA syndrome and discuss whether surgery or conservative management should be taken into consideration.

Case Description: First patient suffered from recurrent episodes of diffuse intermittent abdominal pain and early satiety during the last 11 months and the second presented with abdominal pain and vomiting. Abdominal ultrasound revealed reduced space between the superior mesenteric artery and the aorta in the first patient, which aired suspicion of SMA later confirmed by CT scan. No weight loss was noted, therefore no conservative treatment could be suggested and underwent surgery where side to side duodenojejunal anastomosis was performed.

The second patient suffered from acute abdominal pain and vomiting without weight loss. Due to inconclusiveness of the U/S imaging a CT scan was performed in which the angle was on borderline, barely an indication to proceed to surgery at the time so the conservative approach was more appropriate for the time.

Conclusions

SMA syndrome's diagnosis in children remains challenging, especially when the presentation is non-specific. Typically, it is associated with recent significant weight loss. When this is not the case, surgical repair is recommended to offer a better quality of life, especially in females, whose potential pregnancy can further deteriorate the duodenal stenosis and make oral feeding difficult.