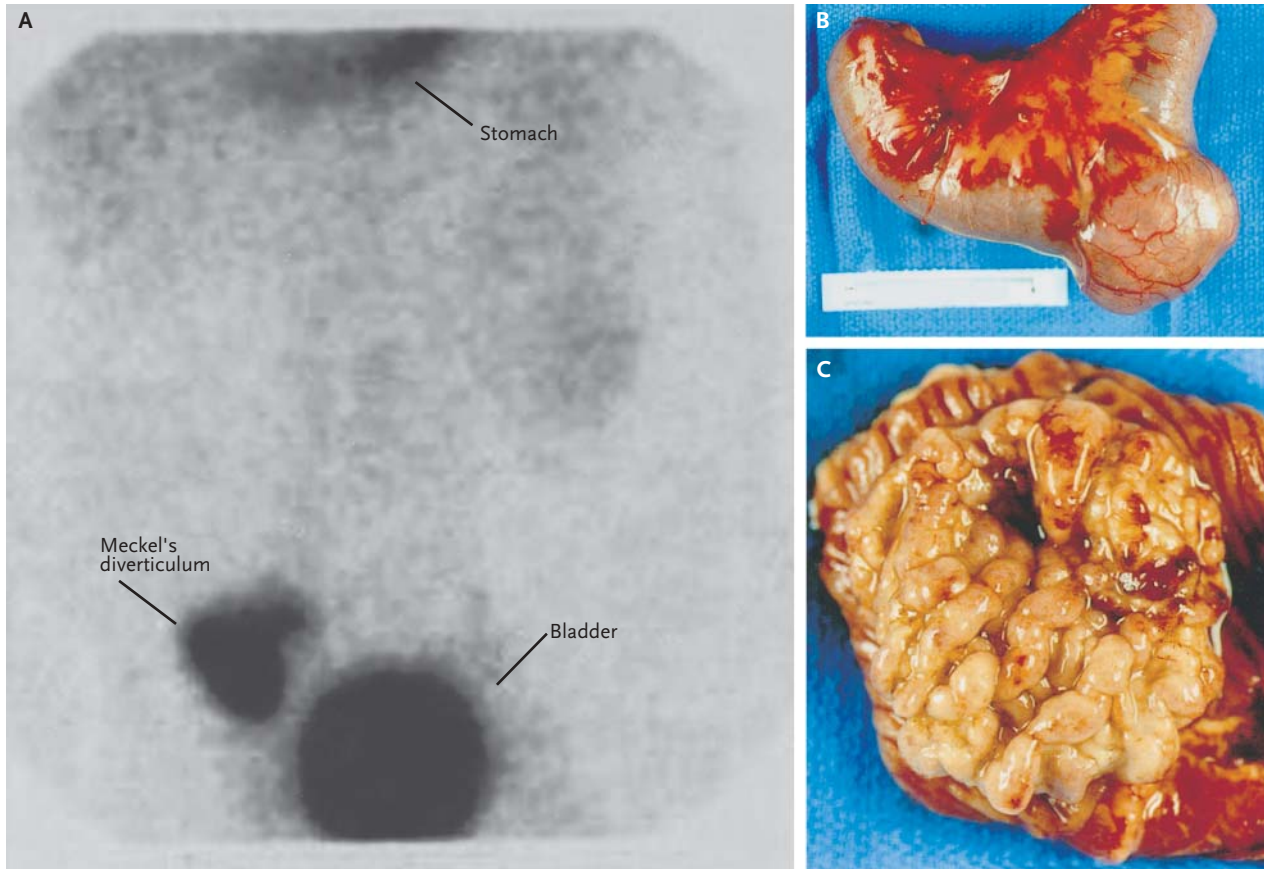


A Bleeding Meckel's Diverticulum



A 29-YEAR-OLD MAN PRESENTED TO THE EMERGENCY DEPARTMENT AFTER two days of hematochezia. He had a hemoglobin level of 7.2 g per deciliter. Esophagogastroduodenoscopy showed no identifiable source of bleeding. Technetium-99m pertechnetate radionuclide scanning suggested the presence of ectopic gastric mucosa in the right lower quadrant (Panel A). The patient subsequently underwent surgical resection of a Meckel's diverticulum that measured 9 cm by 3 cm (Panel B). Pathological examination confirmed the clinical diagnosis by showing ectopic gastric mucosa with benign hyperplasia and hyperplastic polyp formation (Panel C). The patient had no further episodes of hematochezia.

Ectopic tissue that is predominantly gastric mucosa is frequently found in Meckel's diverticula and can lead to ulceration and bleeding. Technetium-99m pertechnetate is taken up preferentially by the parietal cells of gastric mucosa and allows for noninvasive detection of ectopic tissue in the diverticulum.

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