Don't give up hope

In a recent visit to the intensive care unit I saw a 69 year old Hindu patient. His case was unusual in that he had been brought back to our hospital after active treatment had been declined by his family at an earlier presentation.

He had visited the hospital 25 days previously for limb weakness and bladder and bowel incontinence associated with dizziness but no headache. He had no spina Injury, and the results from magnetic resonance imaging were normal. He was sent back home with conservative management—corticosteroid, multivitamins, and treatment for his concurrent illnesses of benign enlargement of the prostate and hypertension.

The patient then developed acute retention of urine, for which he was taken to another hospital and catheterised. He was admitted for 10 days, and during that time he developed absolute constipation, which was relieved with an enema. He was discharged back home.

At home he developed abdominal pain and distension, constipation, and reduced urine output, and was brought back to our hospital. His general condition was poor, and a provisional diagnosis of peritonitis secondary to bowel perforation was made. This was explained to his family, who were asked for permission to undertake a diagnostic laparotomy. The family, however, refused: they thought that he was approaching death and that he wouldn’t benefit from further active treatment. Instead, they wanted to allow him to die at Pashupatinath temple. The doctors therefore simply inserted two abdominal drains under local anaesthetic, and about 50 ml of fluid drained therefrom. He died back at his home.

The patient was duly taken to Pashupatinath to await death in the vicinity of the great Hindu god Pashupati. During their wait, the family members felt that the patient showed some improvement and so brought him back to our hospital. This time they gave the high risk consent for emergency laparotomy. This revealed multiple jejunal diverticula and a large perforation in one of them. After resection, anastomosis, the patient’s condition rapidly improved.

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