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## Abstract

**Introduction:** Anticoagulation therapy is widely used for curative and prophylactic purposes. The most serious complication is bleeding, which presents as an intramural hematoma of the small intestine; however, it is uncommon, seen in 1 in 2,500 patients. We report an unusual case of a warfarin overdose that resulted in spontaneous intramural hematoma of the small intestine with intestinal volvulus.

**Observation:** A 60-year-old patient was admitted to the emergency department with diffuse abdominal pain and anuria that had started several hours earlier. The patient had a long history of complicated diabetes, marked by moderate chronic renal failure as well as arterial hypertension and atrial fibrillation, which was managed with the oral anticoagulant acenocoumarol. Respiratory and cardiovascular exams revealed no abnormality except for an irregular rhythm in cardiac auscultation. His abdomen was mildly distended and there was tenderness with Blumberg's sign in the periumbilical region, which was associated with signs of peritoneal irritation. Laboratory tests showed incoagulable plasma, an inflammatory syndrome, and renal failure. The Computed tomography (CT) scan without intravenous injection revealed a spontaneous intramural hematoma of the small intestine with intestinal volvulus; moderate hemoperitoneum was also documented. Initial patient management consisted of of o 06

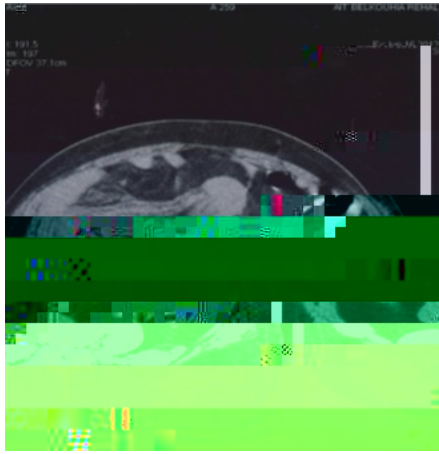


Figure 1:

