



Pilot Case Series Demonstrating Unsuspected Ulceration in Perforated Ileum from Typhoid Fever

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Abstract

A recent case series of patients with suspected typhoid fever presenting with peritonitis and evidence of perforation were treated with simple closure, exteriorization of the perforated segment, and resection with ostomy formation. Resection with ostomy formation has been successful in severely advanced cases. The series has demonstrated two previously unreported features of the disease – multiple severe ulcerations throughout the distal ileum. Observations of a series of cases highlight contemporary challenges.

Early and uncomplicated typhoid enteritis may resemble clinically any of several infective enteritides with a constellation of

