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Psychiatric Aspect in Wilkie syndrome

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Superior Mesenteric Artery Syndrome (SMAS), also known as Wilkie's syndrome, is a rare entity defined as a compression of the third portion of the duodenum between the SMA and the abdominal aorta (AA), due to narrowing of the space between the SMA and AA and

Is primarily attributed to loss of the intervening mesenteric fat pad, leading to partial or complete duodenum obstruction. The most frequent causes of SMAS may be congenital such as shorter Treitz's ligament or abnormal origin of the SMA, or it could be associated with

surgical interventions that distorts the anatomy, such as scoliosis correction surgery or esophagectomy. Its manifestation is complex, including postprandial epigastric pain, nausea,

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Fear of eating (Cibophobia)

Patients with Wilkie syndrome experience extreme anxiety around your trigger foods. Symptoms of anxiety include restlessness, fatigue, muscle tension, irritability, difficulty concentrating, and constant worrying.

Early satiety

Early satiety occurs when a person cannot eat an adequately sized meal or feels full after only a few bites. In the short-term, this can lead to nausea and vomiting. In the long-term, a person may experience nutritional deficiencies and associated health complications.

- -Anorexia
- -Depression
- -Psychosomatic disorders
- -Loss of Trust
- -Serotonin and mibrobiome

Nutritional psychiatry

Nutritional psychiatry is a growing discipline that focuses on the use of food and supplements to provide these essential nutrients as part of an integrated or alternative treatment for mental health disorders.

Figure 1: SMAS, Abdominal Aorta - AMS

Angulation < 25 degree, 3rd part of duodenum Compression-Obstruction

Vomiting, early satiety, weight loss and malnutrition. The aim of this study is to mention the vascular surgery approach - vascular decompression by transposition of SMA to the infrarenal part of the aorta, which can be considered a safe surgical option with favourable outcomes.

Biography

Strong EK. Mechanics of arteriomesenteric duodenal obstruction and direct surgical attack upon etiology. Ann Surg. 1958; 148:725–730 Sapkas G, O' Brien JP. Vascular compression of the duodenum (cast syndrome) associated with the treatment of spinal deformities. A report of six cases. Arch Orthop Trauma Surg. 1981; 98:7–11. Rehman A, Saeed A, Shaukat T, Jamil K, Zaidi AH, Abdullah K: Wilkie's syndrome . J Coll Physicians Surg Pak. 2011, 21:43-45. Von Rokitansky C. Lehrbuch der pathologischen Anatomie. ed 3. Vol. 3. Vienna:Braumüller und Seidel; 1861. p. 87.