Small bowel obstruction (SBO) in the context of jejunal diverticulosis is a rare scenario. Diverticulosis is a condition characterized by the formation of small pouches in the wall of the colon, which can be asymptomatic or lead to complications such as obstruction or bleeding. The presence of enteroliths within the diverticula can further complicate the scenario, leading to mechanical obstruction or intussusception.

**Background**

Jejunal diverticulosis is an uncommon pathology with a low prevalence, estimated to affect less than 5% of the population. It is more prevalent in the elderly and patients with a history of ileal resection. Enterolith formation within these diverticula can occur due to the accumulation of indigestible material, leading to partial or complete obstruction of the bowel. The diagnosis can be challenging as the clinical presentation can mimic other causes of SBO.

**Objective**

Case Presentation

A 67-year-old woman presented with a 1-day history of abdominal pain, nausea, and vomiting. Her medical history included hypertension, hyperlipidemia, and diverticular disease. She had previously undergone ileal surgery for diverticulitis. On physical examination, the abdomen was distended, and the patient appeared to be in significant discomfort. Laboratory tests revealed a leukocytosis and an elevated white blood cell count.

**Images**

![Image of a patient with bowel obstruction](image1.jpg)

**Discussion**

Small bowel obstruction is a surgical emergency requiring prompt diagnosis and treatment. The typical presentation includes abdominal pain, distension, and failure to pass flatus or stool. The imaging modalities used for diagnosis include plain radiographs, CT scans, or gastrointestinal series. In cases with enteroliths, abdominal radiography may help visualize the radiopaque stones, aiding in the diagnosis. However, the definitive diagnosis often requires surgical exploration.

**Conclusion**

jejunal diverticulosis is associated with a higher incidence of complications compared to other forms of diverticular disease. Early recognition and intervention are crucial to prevent severe complications such as bowel perforation, peritonitis, or bowel ischemia. The presentation of jejunal diverticulosis with enteroliths is even more unusual and highlights the importance of a multidisciplinary approach to management.

**References**