

### Question 21 – December 26

A 35 year old man with a history of low grade lymphoma presents with episodes of severe diffuse abdominal pain with nausea, vomiting and diarrhea. His CT showed bowel wall edema in small bowel with small ascites. He has no fever or chills. His CBC, LFT and Lactate are within normal limits. A follow up imaging after three days is normal with no ascites now.

Which of the following is more likely to be helpful during an episode of abdominal pain?

- A. Diagnostic laparoscopy
- B. Lipase level and EUS of pancreas
- C. Serum C4 level
- D. Urgent paracentesis

**Answer: C**

Acquired angioedema is a rare disorder caused by an acquired deficiency of C1 esterase inhibitor. It is characterized by submucosal edema of the skin, or of the respiratory or gastrointestinal tract. When localized in the gastrointestinal tract, it can cause severe abdominal pain, mimicking an acute surgical abdomen, or chronic recurrent pain of moderate intensity. During an attack C4 level, total complement level and C1 esterase inhibitor levels are decreased.

#### **Reference:**

Gelfand, Jeffrey A., et al. "Acquired C1 esterase inhibitor deficiency and angioedema: a review." *Medicine* 58.4 (1979): 321-328.