INTESTINAL ENTRAPMENT AND VOLVULUS TREATED WITH PROXIMAL DUODENO-ILEAL ANASTOMOSIS IN A GREEN IGUANA (*Iguana iguana*)

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ABSTRACT

A 13-yr-old female green iguana (*Iguana iguana*) was evaluated after a 6-day history of vomiting, anorexia, lethargy, and decreased fecal and urate output. The iguana was dull, tachycardic, and had harsh lung sounds on presentation. It regurgitated large amounts of brown fluid when stimulated. Abdominal radiographs revealed a large amount of gas in the stomach and the large intestine. Barium that had been administered 3 days previously by the referring veterinarian was still present in the stomach. Blood work revealed a hypochloremic metabolic alkalosis, hypercalcemia and hyperphosphatemia, and increased uric acid. Intestinal obstruction was suspected. Exploratory laparotomy revealed a mesenteric rent with intestinal entrapment and 170 degree volvulus of the jejunum to the proximal ileum. Resection of the small intestine and anastomosis of the proximal duodenum to the distal ileum was performed. The iguana recovered from surgery and anesthesia without complication and was doing well 7-mo post-surgery. Intestinal entrapment and volvulus is a serious, life-threatening emergency that requires prompt surgical intervention in all species and should be considered in iguanas that present with a history of anorexia and vomiting. This case suggests that the green iguana may do well with subtotal resection of the small intestine, emphasizing the importance of the large intestines in nutrient and energy absorption in this species.