

Ileocecal intussusception. A case report

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Case Report

General Surgery



Background

Intestinal intussusception is defined as the penetration of an intestinal segment into an adjacent segment. In adults, intussusception is an exceptional phenomenon, but with great clinical importance since a high percentage is associated with the presence of a malignant tumor. An 82-year-old male with a chronic-degenerative history of ischemic heart disease secondary to acute myocardial infarction. He went to the emergency department with a clinical picture of 10 days of evolution of pain starting in the epigastrium that is accompanied by nausea and vomiting. Tomography is performed where an intraluminal soft tissue density mass with probable tumor is observed.

Keywords: Intussusception, intestinal, adult.

Intestinal intussusception is defined as the penetration of an intestinal segment into an adjacent segment. In adults, intussusception is an exceptional phenomenon, but with great clinical importance since a high percentage is associated with the presence of a malignant tumor (2).

Case report

An 82-year-old male with a chronic-degenerative history of ischemic heart disease secondary to acute myocardial infarction, reports previous coronary catheterization and coronary bypass surgery 5 years ago, currently being treated with metoprolol and furosemide.

He went to the emergency department with a clinical picture of 10 days of evolution of pain starting in the epigastrium that is accompanied by nausea and vomiting, 6 days ago he started intolerance to the oral route, he denies evacuations in the last 3 days, he reports channeling gases, he denies other symptoms.

Laboratory studies are performed where leukocytes are reported to be 11.1 and neutrophils are 73.8, kidney function tests and electrolytes within normal walls, tomography is performed where an intraluminal soft tissue density mass with probable tumor is observed.

Patient is scheduled for exploratory laparotomy surgical procedure. During the intervention, the presence of intussusception was found at the ileocecal level, an attempt was made to reduce the invaginated segment without being possible, so a segmental right colectomy, intestinal resection, Hartmann's pouch and terminal ileostomy were performed. Indurated tumor and tissue edema were found in the piece. invaginated with color

changes as well as subcentimeter lymphadenopathy in the adjacent mesentery that were also resected and sent for histopathological study, which reported a malignant neoplasm infiltrating pericolonic adipose tissue.

The abdominal computed tomography showed an extensive ileocecal invagination secondary to a tumor in the ileum and/or cecum, with a "doughnut" image in the ascending colon and multiple pathological lymphadenopathy located in the ileocolic and retroperitoneal areas.

Discussion

Intestinal intussusception is the introduction of a proximal segment of intestine into a more distal segment; accounts for only 1-5% of intestinal obstructions. In adults, up to 90% of cases have a demonstrable organic cause, mainly tumor lesions, which act as the starting point or head of intussusception, which is propelled towards the adjacent intestinal segment by intestinal peristalsis. The etiology is malignant in a non-negligible number of occasions (20-66%), generally metastases, adenocarcinoma (the most common in colic invaginations), carcinoids and sarcomas. (6,7)

Conclusion

The incidence of intussusception in the adult population is relatively low, making it a subject of particular interest within the realm of gastroenterology and surgical disciplines. The rarity of this condition necessitates a thorough understanding of its diagnostic criteria, management protocols, and surgical

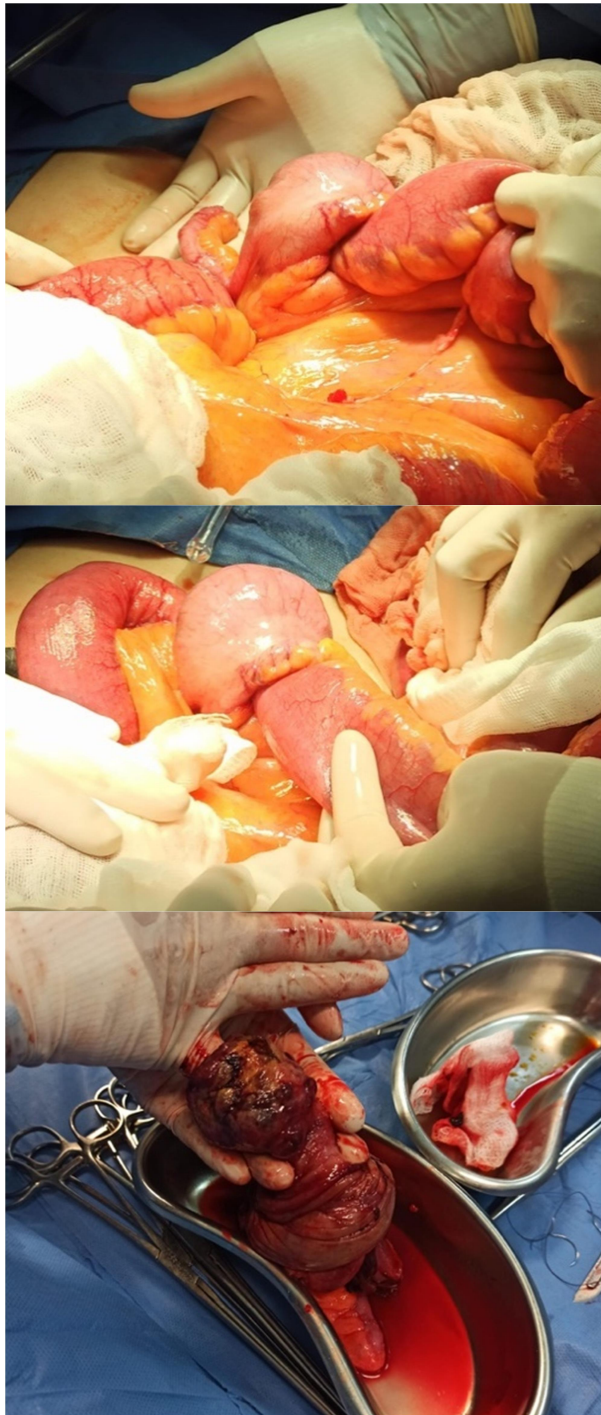


Figure 1. Upper and middle: showing the ileocecal intussusception. Lower: Tumor in ileum/cecum

interventions. Given the potential gravity of the underlying pathology, prompt identification and appropriate surgical intervention are paramount in achieving successful outcomes for patients presenting with adult-onset intussusception. (9)

Conflicts of interests

There was no conflict of interest during the study, and it was not funded by any organization.

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