Chronic Abdominal Pain in an Adult due to Small Bowel Intussusception

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Introduction

- Chronic abdominal; defined as pain present for greater than 3 months. There are numerous etiologies including peptic ulcer disease, biliary pathology, inflammatory bowel disease, irritable bowel syndrome, amongst others. A unique cause of chronic pain in adults is intussusception. Most commonly seen in pediatric patients, intussusception occurs when a proximal segment of bowel telescopes into the lumen of an adjacent segment. Adult intussusception accounts for roughly 5% of all cases of intussusception and reportedly 1-5% of bowel obstructions. While pediatric cases often have no lead point, approximately 70-90% of adult cases have a distinct lesion causing the intussusception. Diagnosis Here we present the case of chronic abdominal pain in an adult due to chronic small bowel intussusception.

Case Report

- A 47-year-old male with no significant past medical history presented with intermittent abdominal pain for one year. The pain was described as colicky and intermittent. He also reported occasional bright red blood per rectum.
- Physical exam was unremarkable, but imaging revealed a short segment small intestine intussusception with a pedunculated mass as the lead point.
- The patient was taken for diagnostic laparoscopy and the segment of intussusception was easily identified, this was reduced, and a clear lesion was palpable with laparoscopic atraumatic graspers. The rest of the bowel had no signs of pathology or adenopathy and therefore a small bowel resection with primary anastomosis was completed. Pathology revealed heterotopic gastric mucosa with a subserosal pedunculated lipoma. The patient's post-operative course was uneventful, he reports resolution of his chronic abdominal pain on follow up.

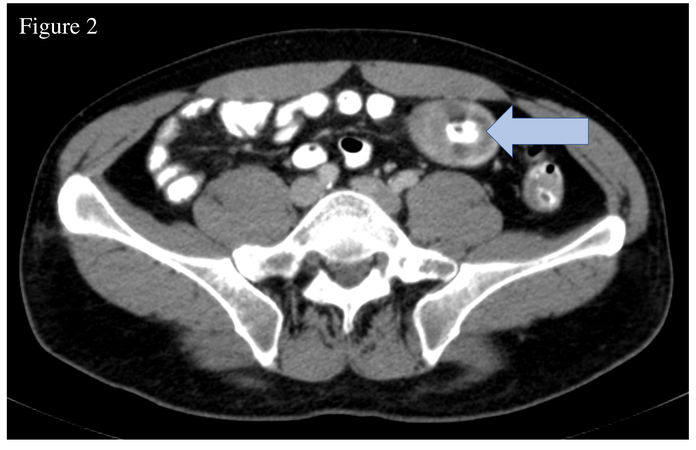

Figure 1. CT coronal view showing the segment of jejunal intussusception
Figure 2. CT axial view showing the classic "target-sign" associated with intussusception
Figure 3. Gross specimen after resection showing the sub-serosal pedunculated lipoma

Discussion/Conclusion

Although most often presenting as a bowel obstruction, intussusception in adults can often present as chronic abdominal pain. Contrast studies in the form of computed tomography or small bowel follow through can help elucidate the diagnosis. Definitive treatment is surgical intervention with resection of the lead point and any additional compromised bowel. A laparoscopic approach to the treatment is both safe and effective.

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