Entero-articular fistula: a rare complication of locally advanced cervical cancer

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Background

A fistula is an abnormal connection between two surfaces within the body, which can occur due to inflammation, infection, or trauma. The most common fistulas found in locally advanced cervical cancer include vesicovaginal and rectovaginal fistulas. These commonly develop after radiation therapy.

Case Presentation

- 62 year old female presented with hypotension, inability to bear weight on the right lower extremity, and erythema of the right hip.
- Medical history includes Stage IVb cervical cancer status post systemic chemotherapy. Treatment was complicated by obstructive uropathy and development of a rectovaginal fistula for which she underwent bilateral nephrostomy tube placement and creation of a diverting colostomy
- As seen in Figure 1, a computed tomography scan of the right hip showed subcutaneous edema and gas tracking from the pelvis through the right sacroiliac joint.
- There was concern for necrotizing soft tissue infection stemming from the development of an entero-articular fistula.

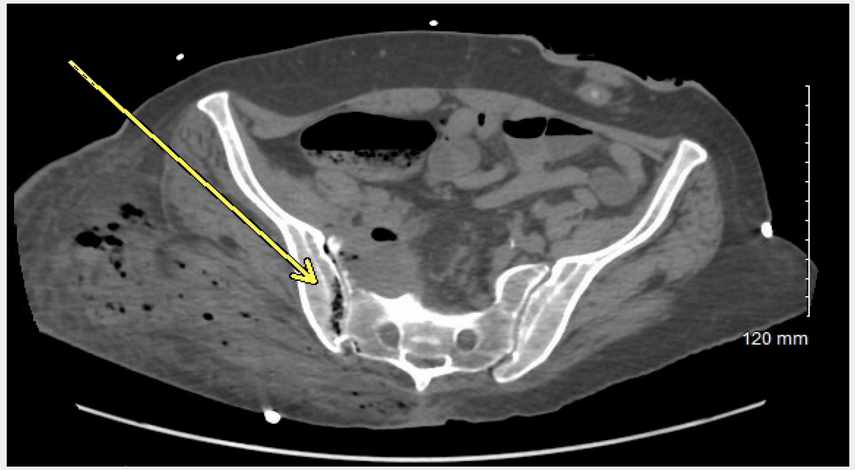


Figure 1: CT scan findings concerning for necrotizing soft tissue infection from an entero-articular fistula

Procedure and Outcome

- The patient underwent incision and debridement of the right hip which revealed fat necrosis and purulence tunneling from the subcutaneous tissue of the right hip towards the right sacroiliac joint.
- Wound cultures grew multiple species of aerobic and anaerobic enteric flora.
- Her postoperative course was complicated by septic shock which prevented return to the operating room for further debridement.
- She later transitioned to hospice and died soon after.

Discussion

- Fistulazation from the colon or rectum to an adjacent joint is a rare sequela of cervical cancer that has not been previously reported
- Our case is unique in that the patient did not have prior radiation exposure
- Surgical intervention for fistulas include diverting ostomies, Martius flap repairs of rectovaginal fistulas, and pelvic exenteration
- These procedures are indicated for source control and to prevent fistulization

Conclusion

This case highlights the rare presentation of an entero-articular fistula leading to necrotizing soft tissue infection in a patient with locally advanced cervical cancer. Early recognition of these complex and rare fistulas can assist with infection control and prevention of septic shock. This is an important complication to recognize given the high morbidity and likely mortality rate of entero-articular fistulas.

References:

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