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Whole colon mobility with cecocolic volvulus and literature review

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Volvulus refers to torsion of a segment of the alimentary tract, which often leads to bowel obstruction. The most common sites of volvulus are the sigmoid colon and caecum. Volvulus of other portions of the alimentary tract, such as the stomach, gallbladder, small bowel, splenic flexure and transverse colon are rare. Patients with a caecal volvulus are young, with a mean age varying from 33 years in India to 53 years in Western countries. In contrast, sigmoid volvulus usually occurs in elderly subjects with chronic constipation or distal colon obstruction. The common presentations are colicky abdominal pain, abdominal distention, constipation/obstipation and depending on vascular status, the patient may be febrile and tachycardic. Here I present a case of cecocolic volvulus involving cecum, ascending colon, transverse colon and distal ileum in a 13 years old girl after she presented with colicky abdominal pain, distension, failure to pass feces and flatus for 3 days. She had also previous history of similar complaint but was self-limiting. She was febrile and tachycardic. Diagnosis was made by plain abdominal x-ray which showed air fluid level. She was prepared and operated and intraoperative finding was 360 degree clockwise rotated right colon and transverse colon along its mesentery which was ischemic and the whole large bowel was mobile and redundant with its own long mesentery. We extended right hemicolectomy and ileotransverse anastomosis. The patient was followed for 1 week in the ward and discharge improved. Now she is being followed in the surgical referral clinic. Details of the pathology, diagnosis and management will be discussed.

Biography

Biniam Ayele graduated from University of Gondar as a Medical Doctor in 2012. Currently he is working as a Physician and Lecturer at Felegehiwot Referral Hospital and Bahir Dar University respectively. He is also a 3rd year Surgical Resident at Bahir Dar University.

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