

# Visual Diagnosis in Emergency Medicine

## ISCHEMIC COLITIS

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### CASE REPORT

A 47-year-old male presented with stools mixed with blood and intermittent pain abdomen for 1 week. Examination revealed blood pressure of 80/60 mm of Hg and pulse rate of 150 beats/min with signs of dehydration and normal systemic examination. Abdominal x-ray study supine was done (Figure 1). As the clinical condition deteriorated, he underwent exploratory laparotomy, which showed extensive necrosis of the ascending and proximal half of transverse colon, so right hemicolectomy and end ileostomy with distal mucoid fistula were done. Patient improved over 2 weeks and was discharged.

### DISCUSSION

Ischemic colitis is predominantly seen in older patients in the sixth to the seventh decade. Risk factors are underlying cardiovascular disease, diabetes mellitus, hypertension, hemodialysis, hypoalbuminemia, heart failure, and drugs (digoxin, aspirin). They present with acute-onset abdominal pain with bloody stools (1).

Abdominal x-ray studies initially show a nonspecific ileus pattern or mesenteric thickening, as ischemia sets into deeper layers there is submucosal edema or hemorrhage, which results in focal mural thickening, seen as “thumb printing” (2). Thumb printing sign can also be seen in pseudomembrane colitis and inflammatory bowel

disease (3). Computed tomography scan appears mostly normal in early or mild cases of ischemic colitis, but can be useful to rule out other causes of abdominal pain.

The majority of patients are managed conservatively with i.v. fluids, broad-spectrum antibiotics, and bowel

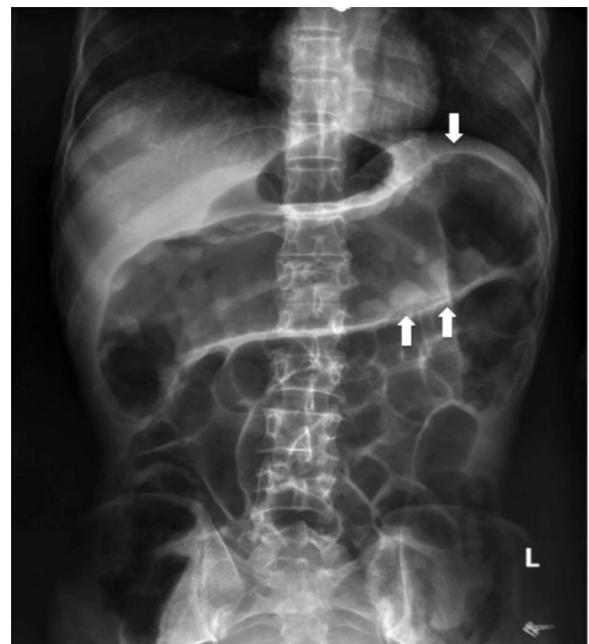


Figure 1. Dilated transverse colon with “thumb printing” seen on the left half.

rest if hemodynamically stable. Presence of peritoneal signs, hemodynamic instability, massive hemorrhage, ongoing sepsis, or nonviable bowel on radiological imaging or endoscopy warrants surgical exploration and resection of the involved segment. Approximately one-fifth of ischemic colitis cases require surgery, and it is associated with high morbidity and mortality.

## REFERENCES

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