

**PP 135 ADULT
INTUSSUSCEPTION: FEW AND
FAR BETWEEN**

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INTRODUCTION

Adult intussusception is rare, represents 5% of all cases of intussusceptions. Almost 90% of cases are secondary to a pathologic condition. Diagnosis of this condition is often difficult in adult, causing diagnostic confusion with other conditions and further delaying the diagnosis.

CASE PRESENTATION

We present a case of a 42-year-old lady who had recurrent visits to Emergency Department with a three-month history of intermittent abdominal pain. Vague abdominal mass was noted over right lower abdomen at physical examination. Bedside abdominal sonography revealed multiple concentric rings of hypoechoic and echogenic layers associated with the sonographic appearance of intussusception. A corresponding contrast-enhanced abdominal CT demonstrated the ileocaecal intussusception. She underwent laparotomy with limited right hemicolectomy. Histopathology report confirmed a polypoidal mass of ectopic gastric tissue as leading point. She has recovered well subsequently.

DISCUSSION

Adult intussusception has been frequently reported as a challenging diagnosis in adults due to its non-specific symptoms. Ultrasonography has high specificity and sensitivity, making it a valuable diagnostic tool in this adult disease. Adult intussusception usually requires surgical resection of

the affected bowel in view of high association with underlying neoplastic etiology.

CONCLUSION

High vigilance and appropriate investigations should be carried out for patient with recurrent visits to Emergency Department due to unresolved abdominal pain. 2) Although rare, intussusceptions should be considered as an infrequent cause of chronic abdominal pain in adults. 3) Bedside abdominal ultrasonography definitely helps to shorten the turnaround time for diagnosing intussusception in adult if performed by experienced clinician.