



CLINICAL IMAGE IN GASTROENTEROLOGY

Sigmoidorectal intussusception as the first manifestation of colonic neoplasia ☆



La intususcepción del colon sigmoide como primera manifestación de neoplasia de colon

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A 92-year-old woman was admitted to the hospital due to hematochezia persisting for 5 days. Anorectal inspection revealed complete rectal prolapse (Fig. 1), with an irregular polypoid neoplasm at the distal end, which was considered the lead point for the prolapse. Manual reduction of the prolapse was easily performed through the anus, but endoscopy revealed a colocolic intussusception that prevented identification of the lumen and scope progression (Fig. 2). To complete the colonoscopy, the prolapse was externalized again and digital examination enabled the identification of the lumen adjacent to the pedicle of the lesion. Prolapse and invagination were simultaneously resolved after scope reintroduction (Fig. 3). Synchronous lesions were ruled out and the pathology study confirmed the diagnosis of adenocarcinoma.

Sigmoidorectal intussusception mimicking rectal prolapse is extremely rare in adults.^{1,2} The present case is an example of the need to consider colorectal cancer in such a



Fig. 1 Complete rectal prolapse with an irregular polypoid neoplasm at the distal end.

clinical setting,^{2,3} and how a simple approach can be used to temporarily resolve the intussusception, preventing mucosal ischemia and the risks associated with urgent surgery.

Ethical considerations

The authors declare that no experiments were conducted on humans or animals in relation to the present case and that they followed the protocols of their work center on the

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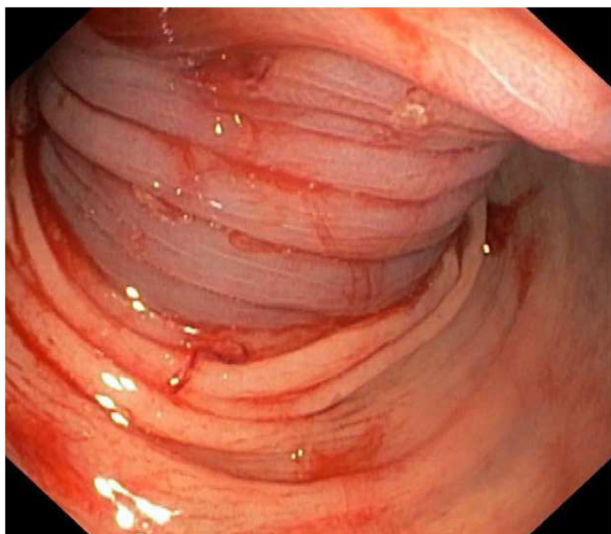


Fig. 2 Colonoscopy performed after rectal prolapse reduction, identifying colonic intussusception. It was not possible to distinguish the lumen.

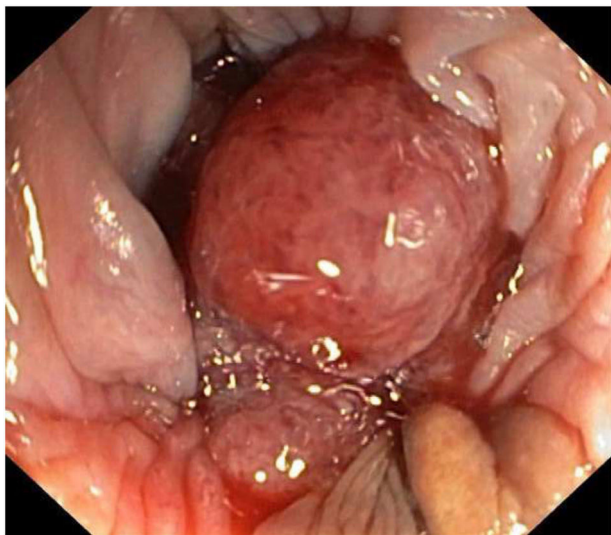


Fig. 3 Introduction of the colonoscope adjacent to the vegetative lesion, where the lumen was identified in the exteriorized prolapse.

publication of patient data, maintaining patient anonymity at all times. The corresponding author has the statement of informed consent. The study protocol was approved by the ethics committee of the Hospital García de Orta.

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Conflict of interest

The authors declare that there is no conflict of interests.

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