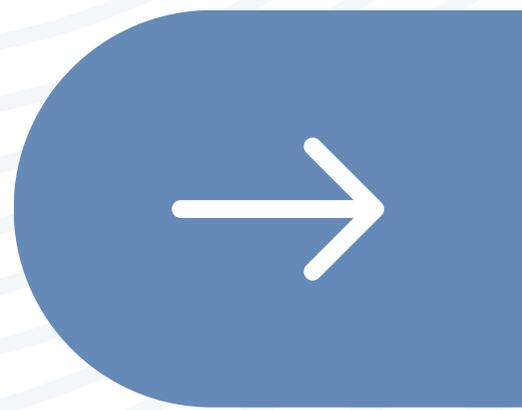




#DIBS BY NEXTILLO

DAILY INFORMATION BULLETIN SERVICE

INTUSSUSCEPTION





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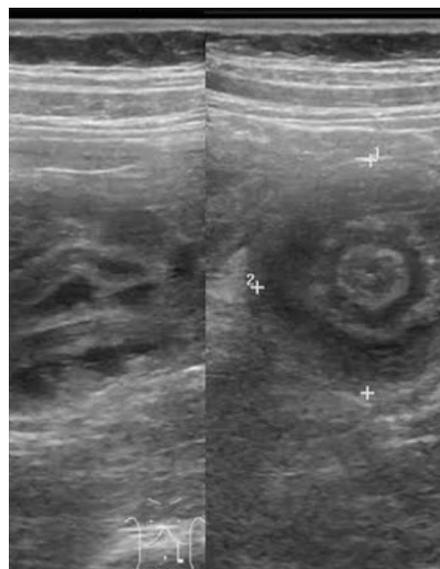
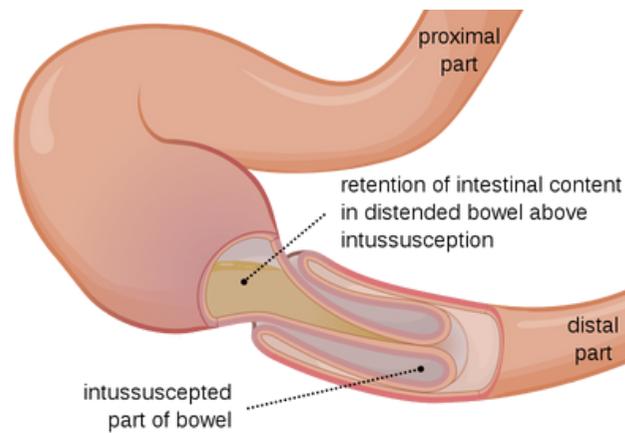
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INTUSSUSCEPTION

Intussusception is a medical condition characterized by the telescoping or invagination of one portion of the intestine into another. This often leads to obstruction and, if left untreated, impaired blood flow to the affected segment of the intestine.



CLINICAL IMPRESSION





CLINICAL FEATURES

Colicky Abdominal Pain

Sudden, severe, intermittent abdominal pain is a hallmark symptom. The pain is often associated with drawing up of the legs.

Vomiting

Episodes of vomiting are common and may be bilious if there is complete obstruction.

“Currant Jelly” Stools

As the condition progresses, there may be the passage of stools mixed with mucus and blood, giving them a characteristic appearance referred to as “currant jelly” stools.

Palpable Abdominal Mass

A sausage-shaped mass may be palpable in the abdomen, especially in the right upper quadrant.



DIAGNOSIS

Ultrasound

Imaging modality of choice for diagnosing intussusception, showing the classic “target sign” or “doughnut sign.”

Barium or Air Enema

Therapeutic as well as diagnostic, as it can often reduce the intussusception.

Blood Tests

Complete blood count (CBC) may show an elevated white blood cell count, and metabolic acidosis may be present in severe cases.



MANAGEMENT

Enema

Non-operative reduction using a barium or air enema is successful in the majority of cases.

Surgery

If enema is unsuccessful or in cases of bowel perforation, surgery may be necessary to correct the intussusception and address any necrotic bowel.





INTUSSUSCEPTION

Question:

A 6-month-old infant presents with sudden, severe abdominal pain, vomiting, and “currant jelly” stools. On examination, a sausage-shaped mass is palpable in the right upper quadrant. What is the most likely diagnosis?

- A) Appendicitis
- B) Intussusception
- C) Hirschsprung’s disease
- D) Meckel’s diverticulum

Answer: B) Intussusception