



Pop Goes the Colon! An Unusual Case of Cecal Perforation

Caileen Sennett, MD¹, Gres Karim, MD¹, Minira Aslanova, DO¹, Wan Lam MD¹

¹Department of Medicine, Mount Sinai Beth Israel Medical Center. Icahn School of Medicine at Mount Sinai. New York, NY.

Introduction

The cecum is one of the most common locations of perforation given it is the thinnest portion of the large intestine. Perforation of the cecum usually occurs due to neoplasm or diverticulitis. Iatrogenic causes with foreign body ingestion are rare causes of cecal perforation.

Case

A 72-year-old man presented to the emergency department complaining of right, lower abdominal pain for three days. The pain was described as constant and worsened upon deep breathing.

Initial labs were significant for a leukocytosis of 16.1 K/uL. He was started on flagyl, cefepime and vancomycin.

CT abdomen and pelvis revealed a linear hyperdense structure within the cecum, transferring across the cecal wall into the peritoneum, concerning for a cecal perforation (Figure 1).



Figure 1
CT abdomen and pelvis revealed a linear hyperdense structure (yellow arrow), transferring across the cecal wall into the peritoneum, concerning for cecal perforation secondary to a foreign body with surrounding inflammatory changes.

Case Continued

The patient was taken for an exploratory laparoscopy with general surgery. A 4-inch plastic toothpick was found penetrating through the cecum with surrounding inflammation. The findings prompted a right hemicolectomy with primary anastomosis.

Discussion

Diagnosis of cecal perforation is made primarily through clinical presentation and imaging studies. Initial management of a patient of suspected intestinal perforation includes intravenous fluid therapy and broad spectrum antibiotics.

A conservative treatment approach may be chosen if the patient is without signs of sepsis, perforation is contained, or there is evidence of limited contamination of surrounding tissues. As seen in our patient, operative management is indicated due to evidence of perforation with surrounding tissue involvement. Resection of colon is indicated when devascularization of the colon wall is present.