



The Great Imitator Strikes Again! Colonic Ischemia Manifesting as a Solitary Cecal Ulcer



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Introduction

- Solitary cecal ulcer is a relatively rare condition, with non-specific signs and symptoms
- While ischemia is the most common cause of colonic ulceration, carcinoma is the most common cause of ulceration in the cecum

Case Description

- An 85-year-old male with a history of dementia, stroke, and cardiovascular risk factors presented to the emergency department for altered mental status, where he subsequently had large volume hematochezia
- The patient was tachycardic, but normotensive and afebrile. His physical exam was notable for a normal abdominal examination, and being alert but oriented only to self and location
- Laboratory findings were notable for a hemoglobin of 8.4 g/dL on presentation, which later dropped to a nadir of 4.6 g/dL
- Computed tomography demonstrated colonic diverticulosis without acute processes. His last colonoscopy was six years prior with eight small adenomas removed
- Patient was admitted to the hospital and resuscitated
- After discussing risks and benefits, patient's medical power of attorney requested we proceed with colonoscopy

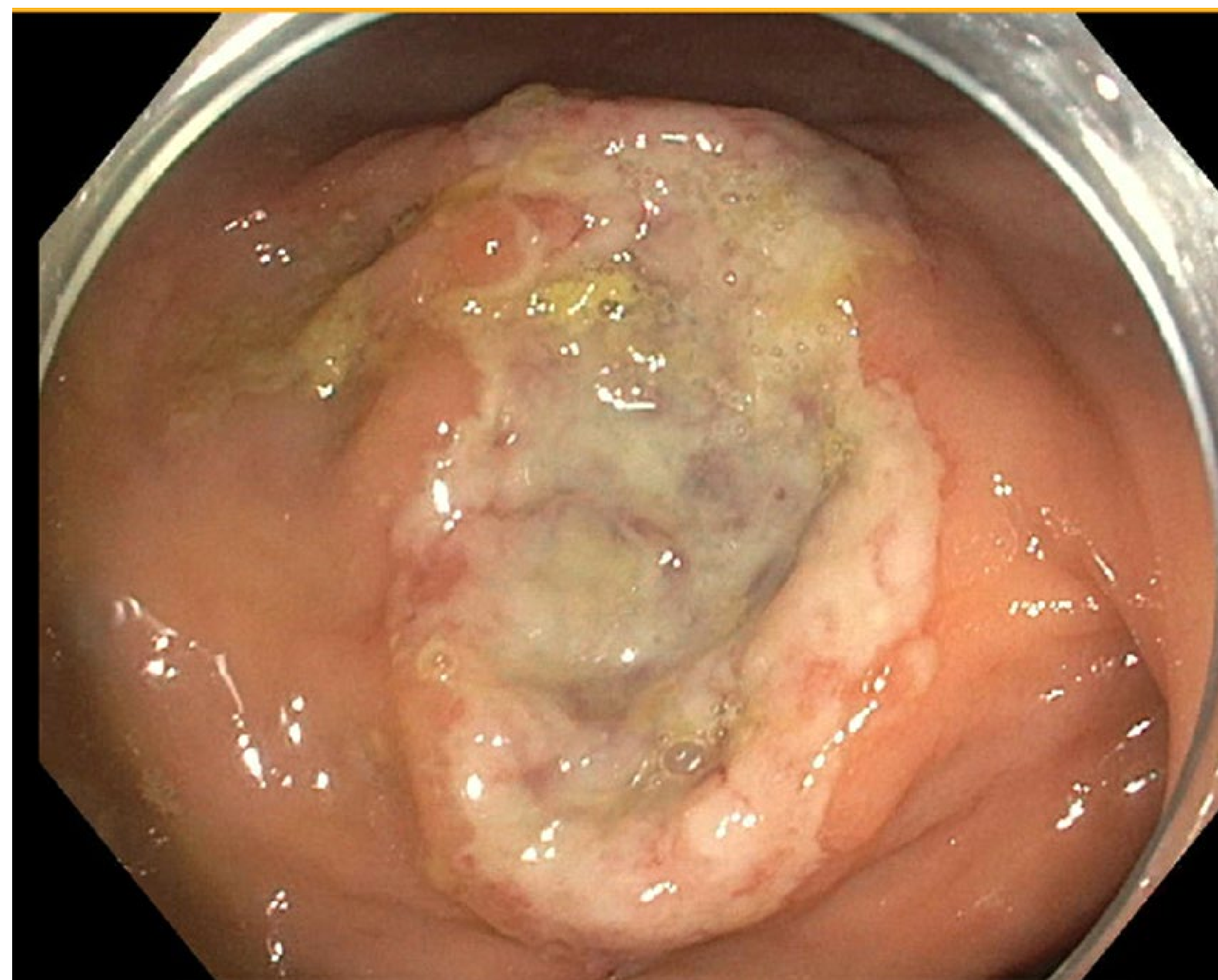


Figure 1. Cecal Ulcer.

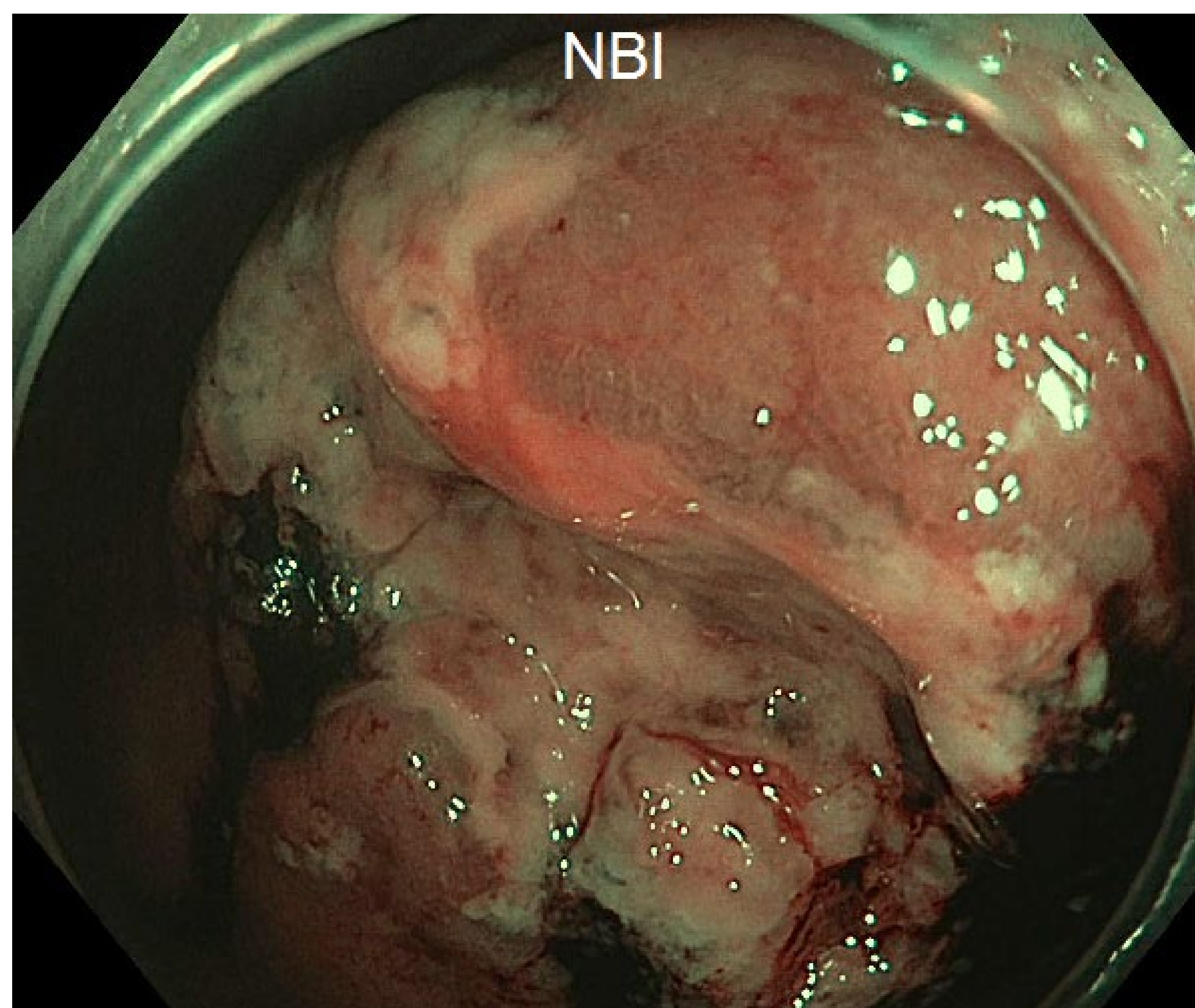


Figure 2. Cecal Ulcer under NBI.

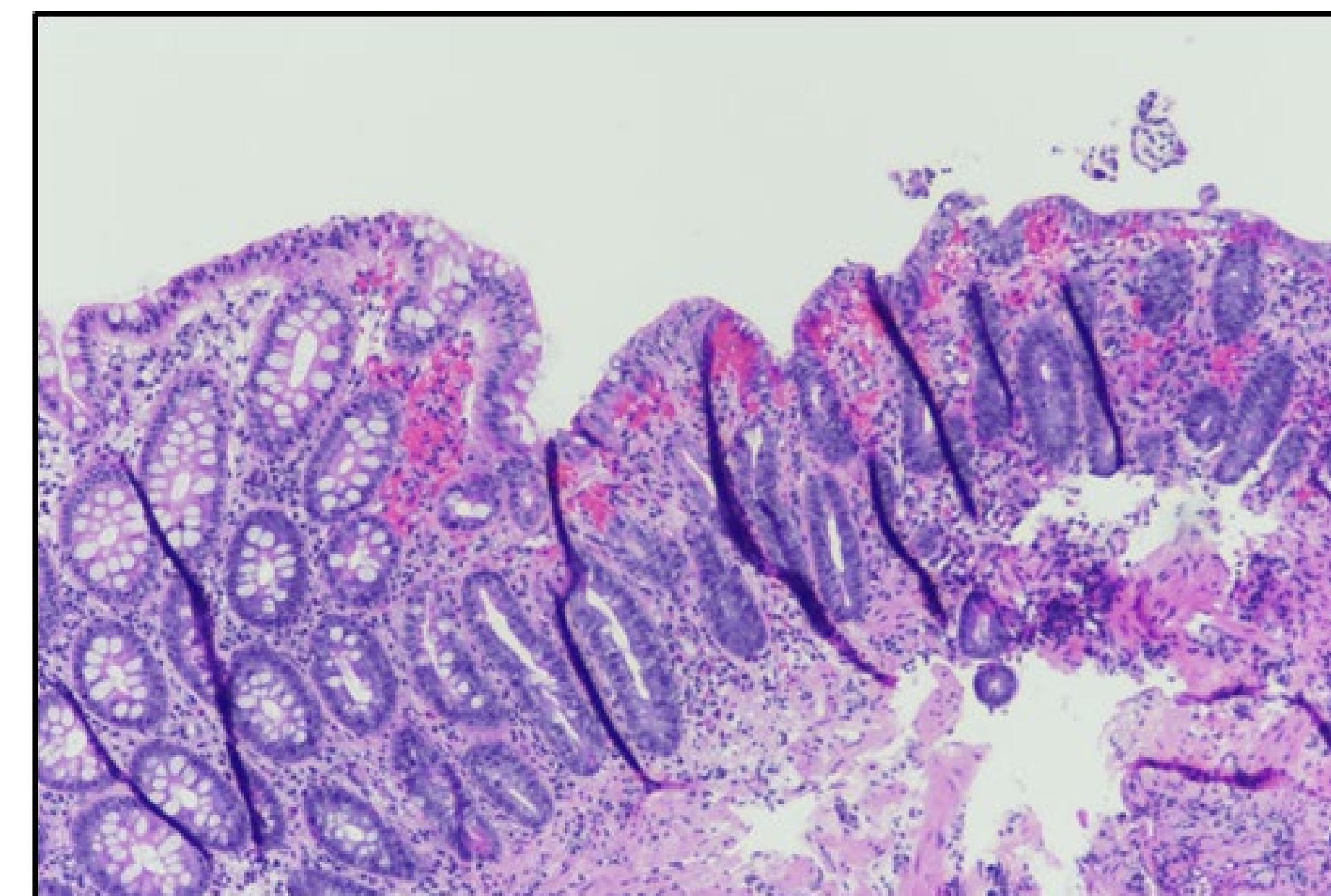


Figure 3. Loss of mucin with atrophic withered crypts.

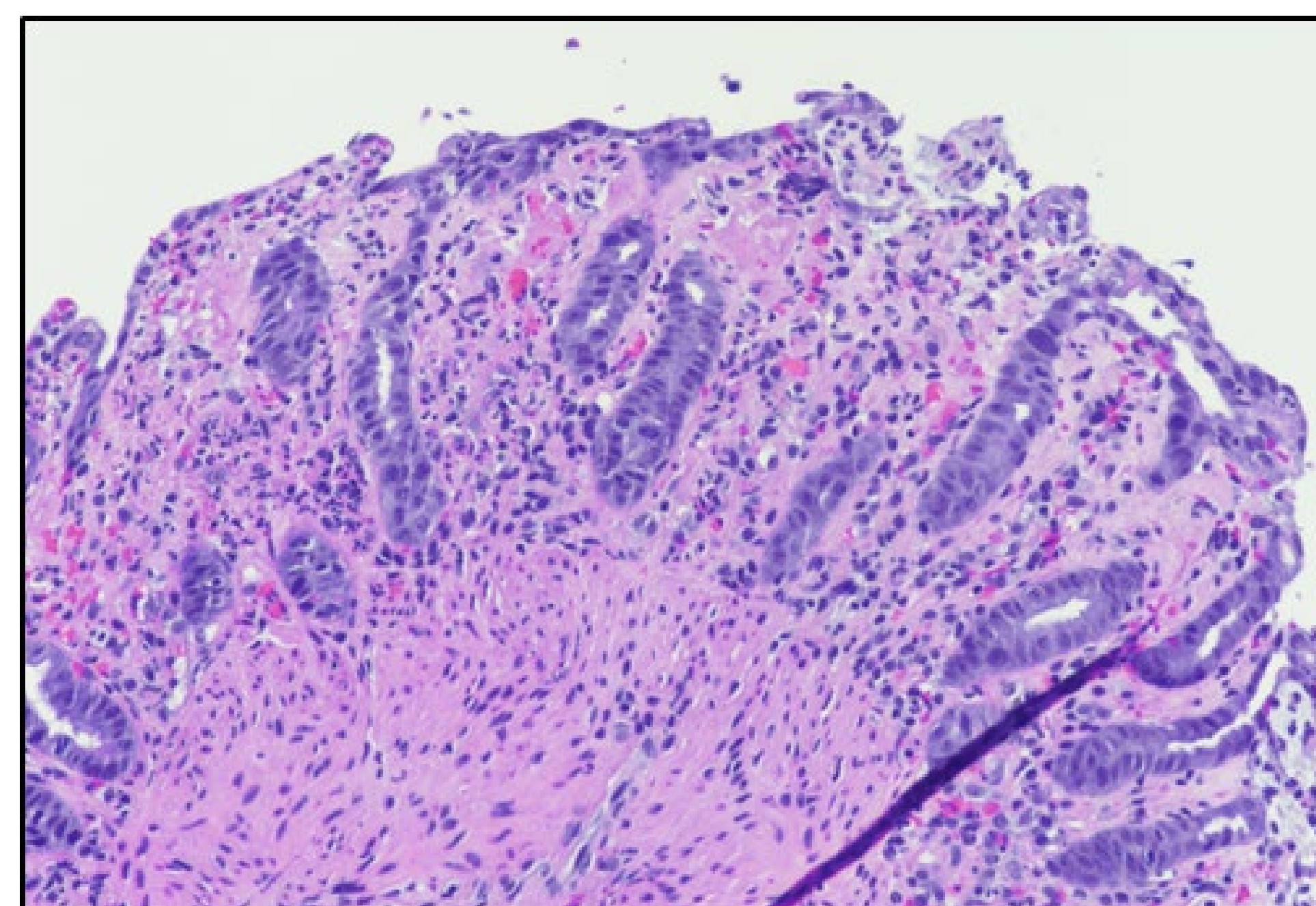


Figure 4. Surface damage with hyalinization.

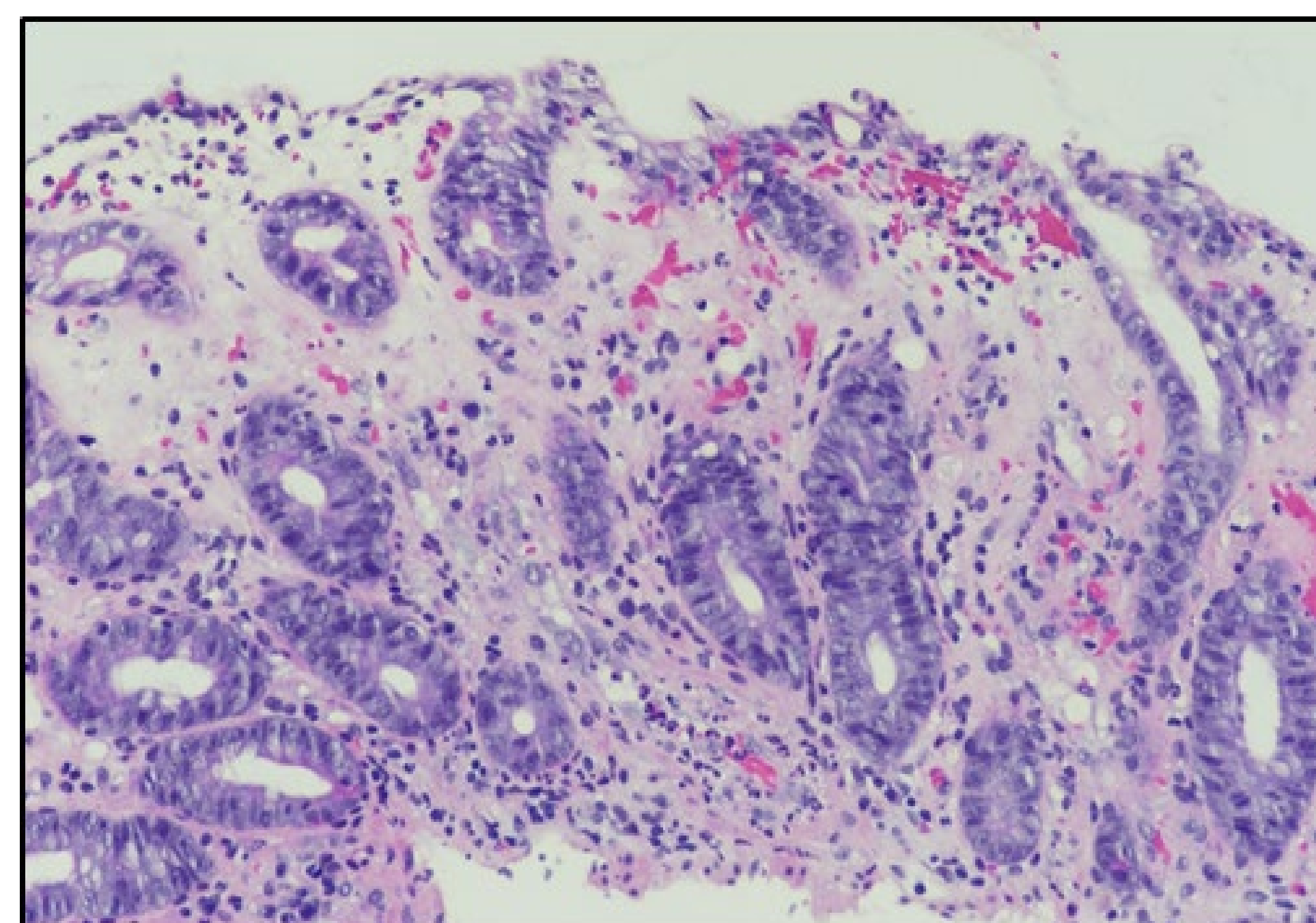


Figure 5. Edema in the lamina propria.

Case Description Continued

- Colonoscopy showed a 3cm by 1.5cm cratered ulcer in the cecum (Fig 1-2)
- Targeted cold forceps biopsies were obtained from the margins of the cecal ulcer
- Patient's post-procedure clinical course was complicated by abdominal pain and fever that evening, with an abdominal x-ray suggesting pneumoperitoneum concerning for a perforation
- Given patient's co-morbidities, he was managed conservatively with NPO and antibiotics with resolution of symptoms and abnormal vital signs; he was discharged home with family
- Pathology later revealed an ischemic colitis pattern of injury, including the transition from normal mucosa to ischemic tissue characterized by loss of mucin and atrophic "withered" crypts, hyalinization, and edema of the lamina propria (Fig 3-5)
- Given patient's co-morbidities, no further follow up was pursued

Conclusions

- Colonic ischemia (CI) is a common disorder that can affect any part of the colon
- CI has highly variable clinical and endoscopic manifestations
- Cecal ulcers are infrequently encountered and should prompt evaluation for malignancy, infections, inflammatory bowel disease, and NSAID use
- Our case emphasizes the elusive clinical presentation of CI and the importance of adequate tissue sampling to rule out other etiologies when encountering isolated cecal ulcers

Contact

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