

Introduction

- Intussusception in adults is a rare condition.
- In the pediatric population, 90% of cases are idiopathic, while lead point represents 70-90% of cases in adults.
- Colo-colonic intussusception (CCI) is most often caused by malignant lead point.
- Here we present two cases of CCI caused by large submucosal lipomas.

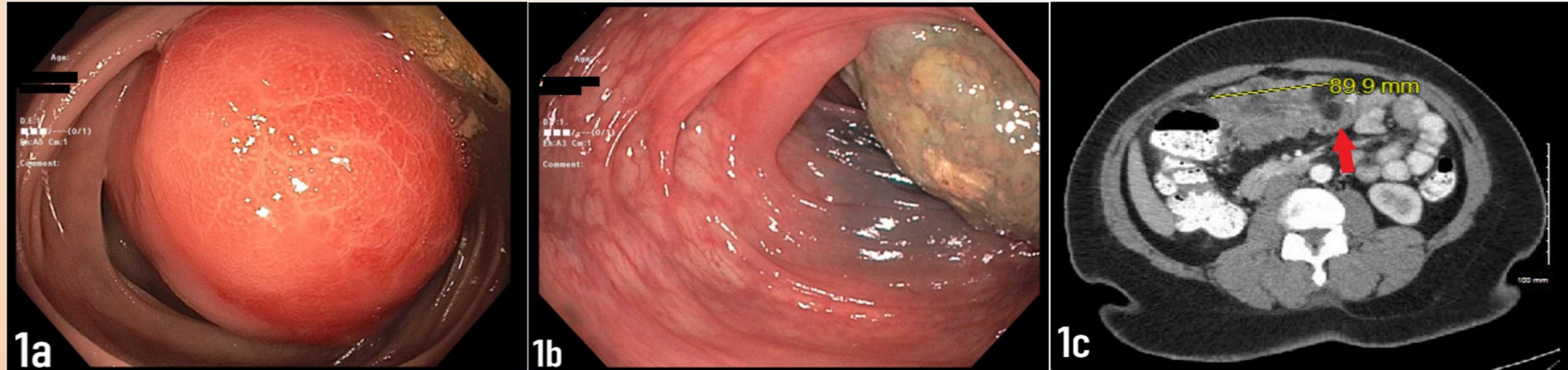


Figure 1. 1a) Colonoscopy with large 6 cm polypoid subepithelial lesion in the proximal ascending colon about 6 cm distal to the ileocecal valve. 1b) Colonoscopy with large 5 cm fungating, partially obstructing polypoid mass in the transverse colon. 1c) CT abdomen/pelvis showing a roughly 4.5 cm submucosal lipoma (red arrow), the leading point of an 8.9 cm long colo-colonic intussusception (yellow line).

Case Descriptions

Case 1: A 61-year-old male presented with a 3-month history of intermittent hematochezia. Initial exam and laboratory studies were unremarkable.

- CT abdomen/pelvis revealed a 6.7 x 4.2 cm fatty mass near the ileocecal valve area.
- Colonoscopy confirmed a 6 cm polypoid subepithelial mass near the ileocecal valve [Image 1a], with findings suggestive of intussusception.
- Laparoscopic right colectomy was performed. Resected mass was consistent with submucosal lipoma.

Case 2: A 48-year-old female was evaluated for acute crampy abdominal pain. The pain was episodic, lasting approximately 15-20 minutes, and diffuse throughout the abdomen. The patient also endorsed loose stools but without blood.

- Laboratory work was unremarkable.
- CT abdomen/pelvis revealed a 4.5 cm fatty mass within the proximal transverse colon with features of intussusception [Image 1c]. A colonoscopy revealed a 5 cm fungating necrotic mass [Image 1b], biopsy of mass was non-diagnostic.
- She underwent a hemicolectomy. Pathology of resected mass was consistent with submucosal lipoma.

Discussion

- Adult CCI is a rare pathology with a predilection in women between the ages of 40 and 70.
- Symptoms of intussusception are non-specific and can include intermittent abdominal pain with tenderness, constipation, and rectal bleeding.
- Laboratory tests are non-specific and normal in most cases.
- Diagnosing CCI can be readily made with CT imaging or colonoscopy.
- Lipomas implicated in this condition are often greater than 4cm in size, with the transverse colon being the most common site. Despite the benign nature of these tumors, when implicated in intussusception, morbidity is high as most patients require colectomies.

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References:

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