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Ascending colon stenosis caused by repeated diverticulitis that clinically mimicked advanced colon cancer

Introduction: We experienced a rare case of right-sided large bowel obstruction (LBO) of the colon caused by chronic diverticulitis, which was challenging to diagnose.

A young male was admitted to our department with a fever, diarrhea and right-sided lateral abdominal pain for several days. CT showed a thickened ascending colon wall with stenosis and adjacent retroperitoneal inflammation without marked diverticula. The next day, he developed severe abdominal pain and perforation was suspected. We chose the “interval definitive surgery”; at that time, intestinal decompression and laparoscopic drainage. Colonoscopy showed an edematous membrane, but no cancerous lesions or diverticula. Hemi-colectomy was performed after 10 days' nutritional therapy. No postoperative complication occurred. The histopathology showed that the pathogenesis was chronic diverticulitis.

Discussion: There have been few reported cases of right-sided LBO caused by diverticulitis, but it is important to be aware that benign disease, such as chronic diverticulitis, can cause LBO. Initial conservative therapy and nutritional therapy produced a correct diagnosis and good outcomes.

Recent Publications

1. Two cases of splenic neoplasms with differing imaging findings that required laparoscopic resection for a definitive diagnosis.
2. The first case of POEMS syndrome with synchronous breast cancer: What are the associated diagnostic challenges?

Biography

Kazuhiro Hiyama is the director of surgery at atago hospital (Kochi, Japan). Hiyama gained the first degree in pharmaceutical sciences at the university of Tokyo. He gained the second degree in medicine at university of Tsukuba (as a principal). He finished the surgical residency and fellowship at the tsukuba university hospital.

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