

Imaging diagnosis

Case 452

2. Ischemic colitis and colon cancer

【Progress】

She received colonoscopy, showing advanced sigmoid colon cancer. She was scheduled to take surgical resection.

【Discussion】

Although ischemic colitis occurs at any part of colon, ischemic colitis is characteristic of occurring at the splenic flexure of colon where it is called watershed area between superior mesenteric artery and inferior mesenteric artery. The symptoms of ischemic colitis are hematemesis (78%), abdominal pain (62%) and diarrhea (38%) (1). Ischemic colitis predominantly occurs in female rather than male, and in aged persons rather than in young those. Further, ischemic colitis predominantly occurs in Japanese rather than western people.

The degree of ischemic colitis advances to several steps; edematous folds, ischemic erosion to ulcer, and finally gangrene (necrosis of colon wall). However, most of them are mild and transient, but recurrent (2, 3).

Most of them are treated with colon preserving serve including no food ingestion and drip infusion, inducing relief of the symptoms (1-3). A few patients with progressive symptoms of perforation, gangrene with possibility of sepsis are served with surgical colon resection under intensive care units.

The cause of ischemic colitis is yet to be clarified. However, endoscopic examination revealed the main changes of ischemic colitis are mucosal surface bleeding and subcutaneous edema, suspicious of intraluminal high pressure after defecation rather than atherosclerotic vessel changes (4, 5). It suggests that the latent colon cancer can be one of the causes of ischemic colitis. Further, ischemic colitis can occur in patients with high age, constipation, and diabetes mellitus, overlapping with the backgrounds of colon cancer.

In our case, she had experienced hematemesis nine months ago whose CT images were made diagnosis of ischemic colitis of sigmoid colon. This time, she experienced hematemesis again whose CT images were done diagnosis of sigmoid colon cancer. Our internal medicine doctor asked us, radiologists, when ischemic colitis was made on imaging diagnosis, colon endoscopy should be recommended in comments to confirm whether it is associated with colon cancer or not. Even if endoscopic examination were incomplete at the day of occurrence of symptoms, complete endoscopic examination is necessary to confirm the absence of colon cancer that can cause ischemic colitis. This comment is reasonable simply because ischemic colitis is reported to be associated with colon polyp in 3.4% and with colon cancer in 3.9 % (6).

【Summary】

We presented a seventy-three-year-old female presented with abdominal pain, hematemesis and vomiting. She had received diagnosis of ischemic sigmoid colitis according to CT findings. Nine months later, she was diagnosed sigmoid colon cancer. Ischemic colitis is thought to arise from elevation of intraluminal pressure. It is borne in mind that ischemic colitis can occur under the background of colon cancer with the incidence of around 4%.

【References】

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