80 y/o M presents with nausea, vomiting and abdominal distension

Samantha Huq, MD, MPH

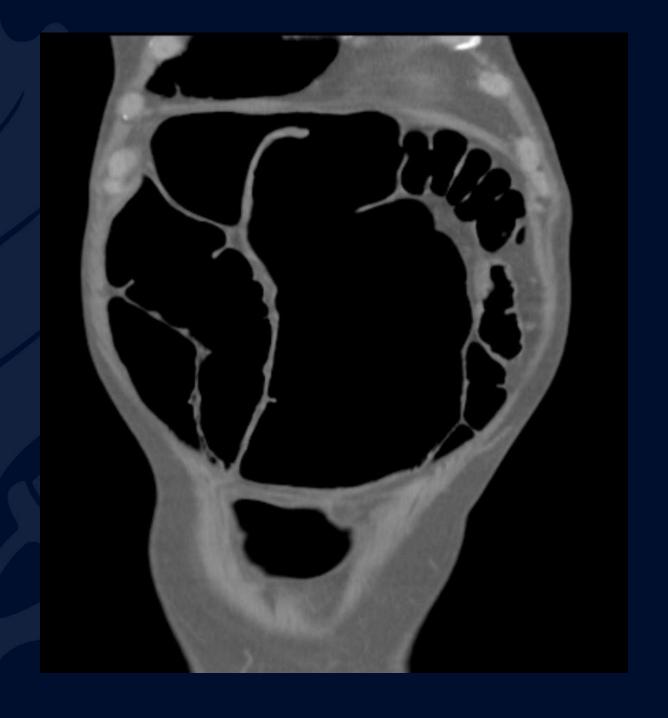


















Sigmoid volvulus

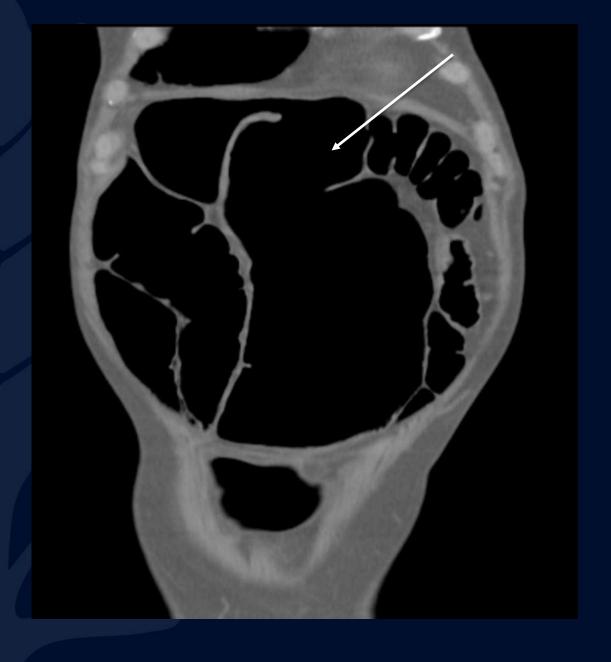




Supine film of the abdomen shows marked dilation of the sigmoid colon (black arrow). The sigmoid is folded back upon itself. The sigmoid extends into the upper abdomen.

HEALTH

RADIOLOGY



Coronal CT demonstrates dilated sigmoid colon (white arrow)



Sigmoid volvulus

What is it?

Torsion or twisting of sigmoid colon around its mesenteric axis. Mortality rate is 20-25%. Serious complication is bowel ischemia

Most common etiology

Chronic constipation and/or laxative abuse Fiber-rich diet Chagas disease

<u>Associations</u>

Chronic neurological conditions (e.g. Parkinson disease, MS, pseudobulbar palsy)

Medications from chronic psychiatric conditions (e.g. chronic schizophrenia)



Sigmoid volvulus

Imaging features

Abdominal radiograph: large, dilated loop of colon, often with a few airfluid levels. Signs including coffee bean sign, Frimann Dahl's sign, absent rectal sign

Fluoroscopy: water soluble contrast enema demonstrates "bird beak sign"

CT: large gas-filled loop without haustral markings

<u>Rx</u>

Rectal tube insertion

Top differential

Caecal volvulus

Colonic pseudo-obstruction

Large bowel obstruction from other causes



References

- Maddah G et al: Management of sigmoid volvulus: options and prognosis. J Coll Physicians Surg Pak. 24(1):13-7, 2014
- Selçuk Atamanalp S: Treatment for ileosigmoid knotting: a single-center experience of 74 patients. Tech Coloproctol. 18(3):233-7, 2014
- Meyer F et al: Unusual "twister"-like appearance of a sigmoid volvulus on computed tomography. Endoscopy. 39 Suppl 1:E295, 2007
- Tiah L et al: Sigmoid volvulus: diagnostic twists and turns. Eur J Emerg Med. 13(2):84-7, 2006

