

Picture Quiz: A Life-Threatening Cause of Abdominal Pain

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Case Report:

A 76 year old man presented to the emergency department with gradual onset abdominal pain over a period of 24 hours and generalised lethargy. The abdominal pain was central with no radiation and was described as an ache by the patient. There was no history of vomiting. He had a 45 pack-year history of smoking. He was noted to have a blood pressure of 150/60 mmHg, pulse of 130 beats per minute, temperature of 36.5°C and saturations of 95% on room air.

On examination the abdomen was firm, distended but non-tender and a fullness was felt in the mid-abdomen which was dull to percussion. There were

no palpable pulsations and the bowel sounds were scanty. His initial blood tests showed a haemoglobin of 96 g/L with an MCV of 86, normal platelet count and clotting. A per-rectal examination revealed an empty rectum and absence of melaena or fresh blood per-rectum. An abdominal X-ray (Figure 1) was requested to rule out early sub-acute large bowel obstruction.

Question:

1. What abnormalities are shown on the X-ray and what is the likely cause?
2. What further investigation should be undertaken?
3. What is the management of this condition?



Figure 1. Abdominal X-ray

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