

Case Report

Twisted Submucosal Ileal Lipoma Presented As Ileo - Ileal Intussusception - A Rare Case Report

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ABSTRACT

Submucosal lipomas are relatively rare. It predominantly arises in the large bowel, followed by small bowel, stomach, and esophagus in decreasing order. Gastrointestinal lipomas are usually solitary, although some patients develop multiple lesions. Larger lesions may cause abdominal pain due to torsion, intestinal obstruction, intussusception, and bleeding with iron deficiency anemia. We are reporting a case of twisted ileal submucosal lipoma presented as acute pain abdomen in a woman of 32 years old; which was diagnosed radiologically as ileo-ileal intussusception. Both gross and microscopic examinations have confirmed the diagnosis of submucosal lipoma with ischaemic changes of overlying mucosa.

Key words: Lipoma, ileum, twisted, intussusception, ischaemia.

INTRODUCTION

Submucosal lipoma of ileum is rare. Intestinal lipomas predominantly arise in the large bowel (51% to 70%), followed by small bowel, stomach, and esophagus in decreasing order. [1] Grossly, it is a bright yellow, round, encapsulated tumor that bulges towards the mucosal surface. [2] Lipoma of the small bowel is characteristically centered in the submucosa. [3,4] Large pedunculated submucosal lipomas may undergo torsion leading to ischaemic change and presented as acute pain abdomen. [1] Radiologically, it has a very characteristic radiographic appearance and sometimes diagnosed as intussusception. [5]

CASE PRESENTATION

We are reporting a case of submucosal ileal lipoma in a woman of 32 years old. The lady came to the emergency

Department with severe colicky pain in right lower abdomen. Physical examination revealed tender abdomen with a vague lump in right lower abdomen and clinically diagnosed as acute bowel obstruction. Emergency ultrasonography (USG) of abdomen was done and diagnosis of intussusception was made. Emergency exploratory laparotomy was done and intraoperative finding revealed a mass in the ileum. Resection of the involved segment followed by ileo-ileal anastomosis was performed and the specimen was sent to the Department of Pathology, Gauhati Medical College, Assam, and India for histopathological examination. Grossly, resected small segment of intestine measuring 7 cm in length was received. On cut open single twisted circumscribed mass noted in the submucosa measuring (3.5 x 2.2 x 2) cm. Cut section of the mass was soft homogenous yellowish to grey white in

colour. Overlying mucosa of the mass and distal portion of intestine was blackish in colour favouring ischaemic changes due to torsion (Figure - 1, 2). Microscopically, submucosal lipoma noted grows toward luminal surface compressing the mucosa and submucosa. It was composed of lobules of mature adipocytes and scattered blood vessels. Overlying mucosa and distal portion of grossly blackish mucosa of intestine had shown features of ischaemic changes - necrosis of mucosal epithelium and extensive haemorrhage in the mucosa (Figure - 3, 4, 5). Patient was found to be uneventful in the post operative period and relieved from previous symptoms.

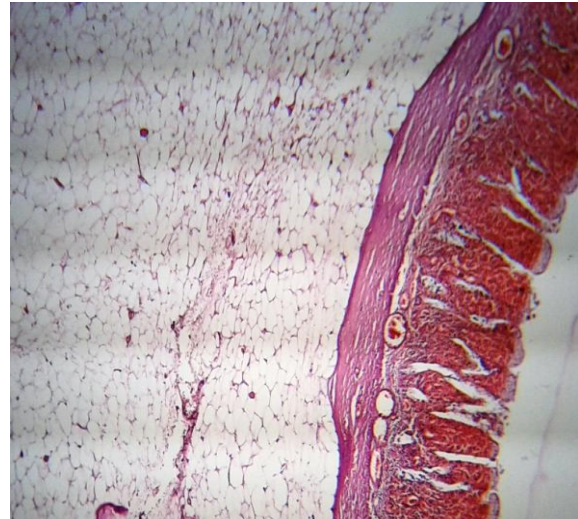


Figure 3:- Low power view showing the ischaemic mucosa and the lipoma in the submucosal location.



Figure 1:- Showing the Gross picture of twisted submucosal tumour & blackish discolouration of the overlying mucosa and distal portion of intestine

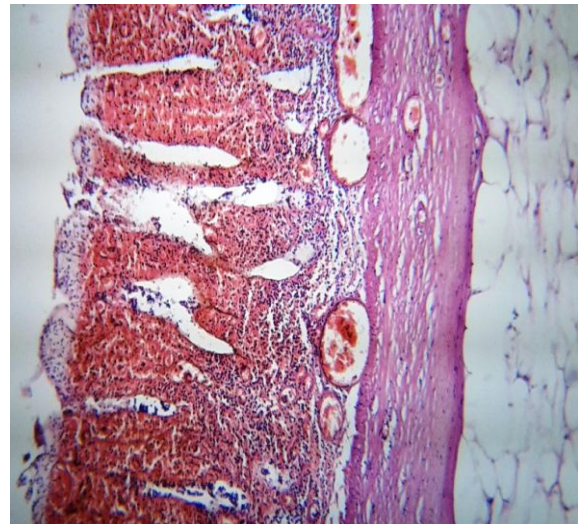


Figure 4:- High power view showing necrosis of mucosal epithelium, extensive haemorrhage & congested blood vessels in the mucosa and part of lipoma.



Figure 2:- Showing the cut surface of the tumour, twisted pedicle and blackish discolouration of the overlying mucosa.

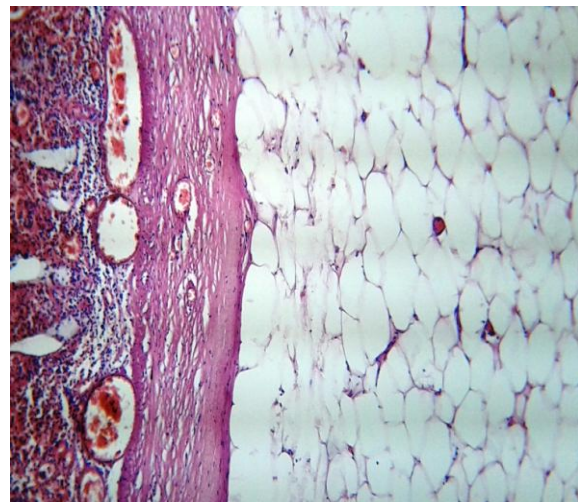


Figure 5:- High power view showing lobules of mature adipose tissue in submucosal location & inflammatory cell infiltration, extensive haemorrhage & congested blood vessels in the mucosa.

DISCUSSION

Submucosal lipoma of ileum is rare. [1] They affect men and women equally and are less frequent in blacks than in whites. They occur in adults as well as children. Most patients with symptomatic lesions are 50 to 60 years old. [1] Majority of intestinal lipoma are solitary. Approximately 5% are multiple; these should be distinguished from the rare condition known as lipomatosis. [2] Colonic lipomas vary in size from several millimeters to 30 cm. Lipomas are usually well-delineated, soft, ovoid, yellowish masses. These tumors can be found by themselves or in groups, and they can be sessile or pedunculated. [6,7] Colonic lipomas are generally asymptomatic and are found incidentally during a colonoscopy or surgery for other conditions. Symptoms correlate with the size of the lipoma; lipomas larger than 4 cm in size become symptomatic in 75% of patients and less than 2 cm in size are asymptomatic. Surgery is the treatment of choice. [8,9] Due to slow growth, most of the patients are in 50 - 60 years of age group; but in this case patient is a young woman with no previous history of pain abdomen. Torsion of the submucosal lipoma of less than 4 cm in size in women of 3rd to 4th decade is significantly rare.

CONCLUSION

Submucosal ileal pedunculated lipoma is rare and can present as acute abdomen clinically; intussusception in ultrasonographic study. It can undergo torsion even in size less than 4 cm and

histopathological examination gives confirm diagnosis.

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