EDORIUM Journals
www.edoriumjournals.com

CASE REPORT OPEN ACCESS

Metastatic melanoma causing multiple small bowel intussusceptions

Mark Halls, James Williamson, Mike Williamson

ABSTRACT

Abstract is not required for Clinical Images

CLINICAL IMAGE OPEN ACCESS

Metastatic melanoma causing multiple small bowel intussusceptions

Mark Halls, James Williamson, Mike Williamson

CASE REPORT

A 69-year-old female with known metastatic malignant melanoma presented with a three-week history of vomiting, altered bowel habit, abdominal distension and passing altered blood per rectum. An eighteen-month history of generalized abdominal pain, weight loss and anorexia were also noted. Prior to these three months, she had a similar obstructive episode. Computed tomography (CT) scan demonstrated metastatic deposits within the liver and on the serosa of the small bowel. This was managed conservatively with resolution of symptoms.

Clinical findings on the second presentation were: a distended, tympanic abdomen with no signs of peritonism. Initial bloods tests revealed a microcytic anemia and an elevated inflammatory response, but no signs of renal impairment or electrolyte imbalance.

Repeat CT scan revealed disease progression and a 'target shaped lesion' consistent with an intussuscepting small bowel loop within the right iliac fossa (Figures 1A–B). Laparotomy revealed four metastatic deposits within the small bowel. One lesion had caused obstruction due to complete intussusception, one had caused a partial intussusception and the remaining two were non-obstructing serosal lesions (Figure 2). The segment of small bowel containing all four lesions was excised by a wedge resection and continuity was restored with an end-to-end anastomoses.

Mark Halls[1], James Williamson[2], Mike Williamson[3]
Affiliations: [1]Senior House Officer, Vascular Surgery, Royal United Hospital, Bath; [2]Registrar, Upper GI Surgery, Royal United Hospital, Bath; [3]Consultant, Colorectal Surgery, Royal United Hospital, Bath.
Corresponding Author: Mark Christopher Halls, Vascular Surgery, Royal United Hospital, Combe Park, Bath, Northeast Somerset BA1 3NG; Ph: +44 (0)7860 559795; Email: mark.halls@nhs.net

Received: 13 September 2013
Accepted: 17 October 2013
Published: 01 February 2014

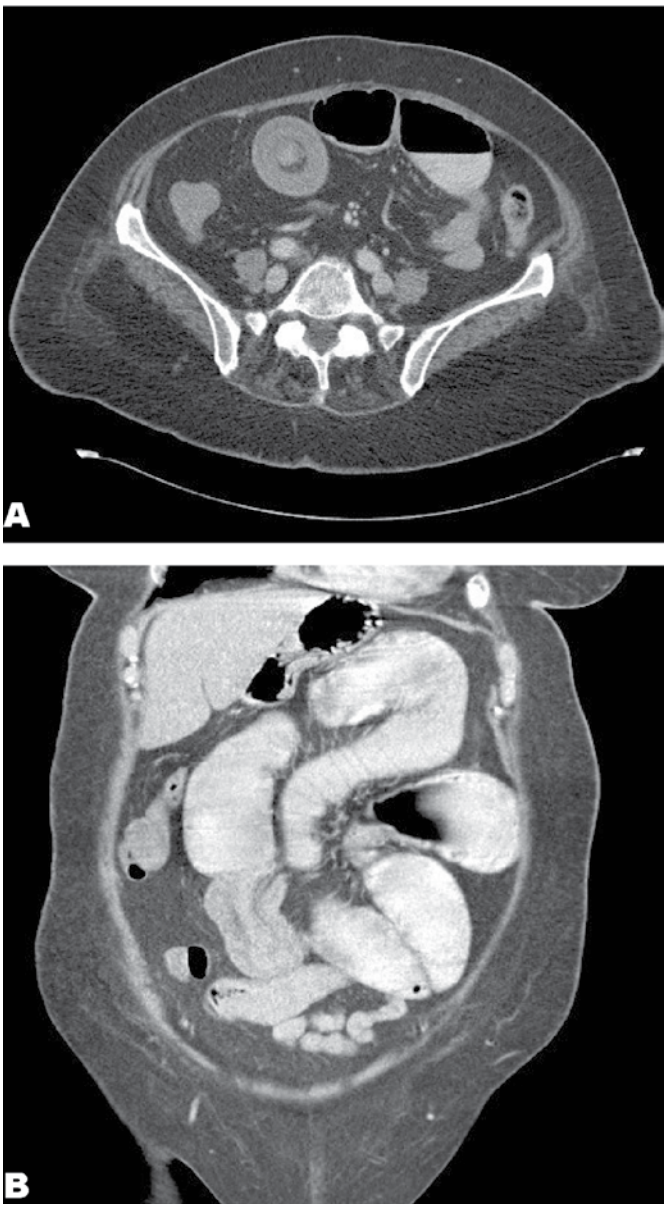

Figure 1: (A) Transverse image from computed tomography scan showing classical target lesion of bowel intussusception (with oral contrast), (B) Coronal image from computed tomography scan showing intussusception of proximal bowel in the distal segment (with oral contrast).

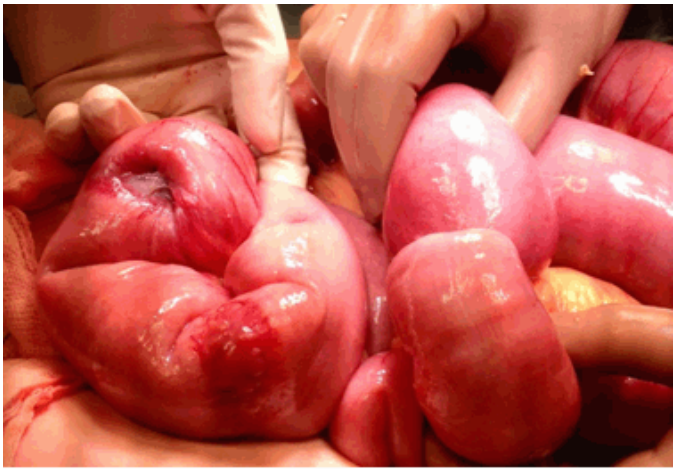

Figure 2: Intraoperative findings, on the right of the image in the surgeon's hands: complete intussusception of the small bowel. To the left: a serosal lesion and above a serosal lesion undergoing intussusception.

DISCUSSION

In pediatric patients intussusception is the second most common cause of abdominal emergencies and is idiopathic in 95% of cases [1]. In contrast, it is rare in the adult population, accounting for only 1% of bowel obstruction and is frequently attributed to neoplasia [2]. Malignant melanoma is a locally invasive disease with a high capacity for metastasis. Metastatic spread is initially through the lymphatic system with distant metastases as a late feature [3]. The gastrointestinal tract represents one of the most common sites for metastatic spread of melanoma. The jejunum and ileum are particularly vulnerable to deposition [4]. Metastatic deposits are either submucosal, causing small bowel obstruction and potential ulceration; or polypoid, which can become a lead point for intussusception [3, 5].

CONCLUSION

In any patient with a history of malignant melanoma and non-specific gastrointestinal symptoms, including small bowel obstruction, the possibility of a small bowel metastases should be considered. This case illustrates the varying progression of metastatic lesions within the small bowel from serosal deposition, through to partial and complete intussusception.

How to cite this article

Halls M, Williamson J, Williamson M. Metastatic melanoma causing multiple small bowel intussusceptions. International Journal of Case Reports and Images 2014;5(2):180–182.

doi:10.5348/ijcri-2014-02-467-CL-19

****

Acknowledgements
Katrina Butcher – Registrar performing the operation

Author Contributions
Mark Halls – Substantial contributions to conception and design, Acquisition of data, Analysis and interpretation of data, Drafting the article, Revising it critically for important intellectual content, Final approval of the version to be published
James Williamson – Substantial contributions to conception and design, Revising it critically for important intellectual content, Final approval of the version to be published
Mike Williamson – Revising it critically for important intellectual content, Final approval of the version to be published

Guarantor
The corresponding author is the guarantor of submission.

Conflict of Interest
Authors declare no conflict of interest.

Copyright

REFERENCES

1. Gayer G, Zissin R, Apter S, Papa M, Hertz M. Adult intussusception – A CT diagnosis. *The British Journal of Radiology* 2002;75(890):185–90.
2. Begos DG, Sandor A, Modlin IM. The diagnosis and management of adult intussusception. *The American Journal of Surgery* 1997;173(2):88–94.
3. Lens M, Bataille V, Krivokapic Z. Melanoma of the small intestine. *The Lancet Oncology* 2009;10(5):516–21.
4. Reintgen DS, Thompson W, Garbutt J, Seigler HF. Radiologic, Endoscopic and Surgical Considerations of Melanoma Metastatic to the Gastrointestinal Tract. *Surgery* 1984;95(6):635–9.
5. Agrawal S, Yao TJ, Coit DG. Surgery for Melanoma Metastatic to the Gastrointestinal Tract. *Ann Surg Oncol* 1999;6(4):336–44.

Edorium Journals: An introduction

Edorium Journals Team

About Edorium Journals

Edorium Journals is a publisher of high-quality, open access, international scholarly journals covering subjects in basic sciences and clinical specialties and subspecialties.

Invitation for article submission

We sincerely invite you to submit your valuable research for publication to Edorium Journals.

But why should you publish with Edorium Journals?

In less than 10 words - we give you what no one does.

Vision of being the best

We have the vision of making our journals the best and the most authoritative journals in their respective specialties. We are working towards this goal every day of every week of every month of every year.

Exceptional services

We care for you, your work and your time. Our efficient, personalized and courteous services are a testimony to this.

Editorial Review

All manuscripts submitted to Edorium Journals undergo pre-processing review, first editorial review, peer review, second editorial review and finally third editorial review.

Peer Review

All manuscripts submitted to Edorium Journals undergo anonymous, double-blind, external peer review.

Early View version

Early View version of your manuscript will be published in the journal within 72 hours of final acceptance.

Manuscript status

From submission to publication of your article you will get regular updates (minimum six times) about status of your manuscripts directly in your email.

Our Commitment

Six weeks

You will get first decision on your manuscript within six weeks (42 days) of submission. If we fail to honor this by even one day, we will publish your manuscript free of charge.

Four weeks

After we receive page proofs, your manuscript will be published in the journal within four weeks (31 days). If we fail to honor this by even one day, we will publish your manuscript free of charge and refund you the full article publication charges you paid for your manuscript.

Mentored Review Articles (MRA)

Our academic program "Mentored Review Article" (MRA) gives you a unique opportunity to publish papers under mentorship of international faculty. These articles are published free of charges.

Most Favored Author program

Join this program and publish any number of articles free of charge for one to five years.

Favored Author program

One email is all it takes to become our favored author. You will not only get fee waivers but also get information and insights about scholarly publishing.

Institutional Membership program

Join our Institutional Memberships program and help scholars from your institute make their research accessible to all and save thousands of dollars in fees make their research accessible to all.

Our presence

We have some of the best designed publication formats. Our websites are very user friendly and enable you to do your work very easily with no hassle.

Something more...

We request you to have a look at our website to know more about us and our services.

We welcome you to interact with us, share with us, join us and of course publish with us.

Edorium Journals: On Web

Browse Journals

CONNECT WITH US