Intraluminal mucus cast complicating carcinoma of the colon

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Summary: A previously unreported complication of a stenosing carcinoma of the colon is described. This was first noticed as a rather unusual X-ray appearance, the significance of which only became clear following surgery.

Introduction

Carcinoma of the left side of the colon commonly presents with mechanical obstruction consequent upon luminal stenosis. Bezoars are concretions of foreign material of variable composition which form in the stomach or intestine and, although often symptomatic, these rarely obstruct (Morson & Dawson, 1979). We report on a patient with carcinoma of the descending colon, which was associated with a concretion formed from endogenous constituents mimicking a bezoar. We can find no previous record of a similar case.

Case report

A 67 year old man was admitted with acute intestinal obstruction. Further questioning elicited a 3 month history of change in bowel habit, anorexia and weight-loss. Clinical examination and plain radiographs confirmed the patient to have large bowel obstruction. A laparotomy and defunctioning colostomy was carried out for carcinoma just distal to the splenic flexure. A subsequent barium enema confirmed the presence of carcinoma and revealed an unusual distal filling defect demonstrated in Figure 1. An elective left hemicolectomy was carried out. The serpiginous filling defect was revealed to be a moulded, white intraluminal cast, composed histologically of mucus with some surface blood clot (see Figure 2).

Discussion

The explanation for this finding is likely to be that chronic blood loss and protein exudation from the margins of the stenosing tumour coalesced with mucus to form a clot. Under normal circumstances this would have been swept on down the colon with the in-

Figure 1 Barium enema demonstrating an annular carcinoma of the proximal descending colon. Distal to the tumour is a serpiginous filling defect (arrowed).

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Figure 2  Surgical specimen demonstrating an adenocarcinoma (A), an incidental benign leiomyo blastoma (B) and a moulded intraluminal cast (C) composed of whitish tissue attached to the distal surface of the carcinoma.

In the presence of a markedly reduced intraluminal flow we presume that the collection propagated in a manner akin to that exhibited by a blood clot in the venous side of the vascular system. We have been unable to find any similar previously reported cases.

Reference

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