

Case Blog

Title: Apple-core Lesion of Colon Adenocarcinoma by Barium Double Contrast Enema

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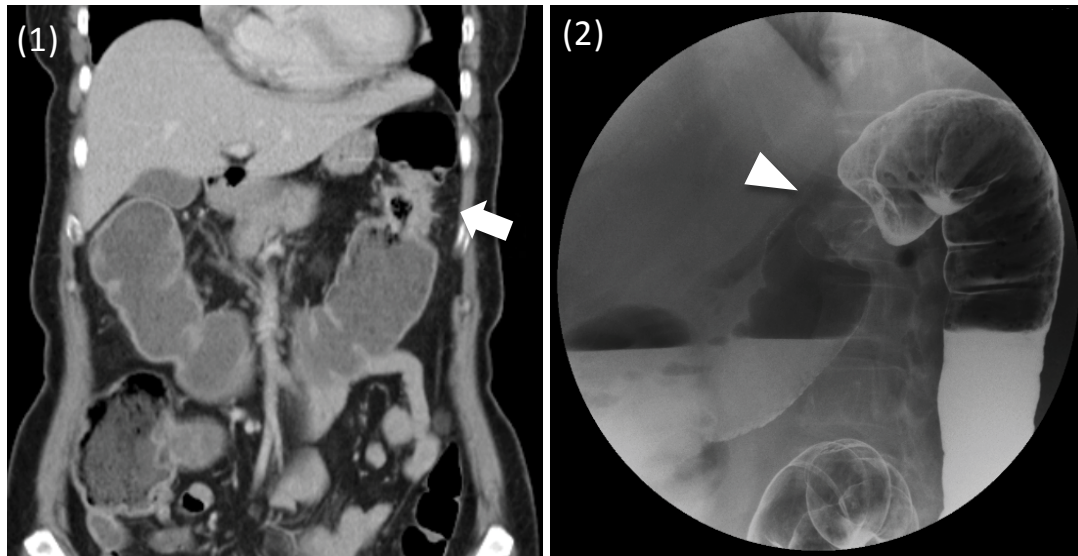


Figure 1: Computed tomography (CT) revealed irregular luminal narrowing and perifocal fat stranding (arrow).

Figure 2: Barium double contrast enema showed an apple-core lesion in transverse colon (arrow head).

Introduction

The apple-core lesion of colon depicts stenosing appearance on imaging study. It can be caused by different etiology. In this case, we have demonstrated an apple-core lesion on barium enema and the operation result revealed adenocarcinoma of colon.

Case Blog

A 64-year-old female came to our hospital presented with diffuse abdominal dull pain, distension and constipation for three days. She denied vomiting, diarrhea, fever, body weight loss or change of bowel habit. Distended abdomen and diffuse tenderness without peritoneal sign were found by physical examination. There was no leukocytosis or electrolyte imbalance. KUB showed focal dilatation of transverse colon. Computed tomography (CT) revealed irregular luminal narrowing at distal transverse colon with perifocal fat stranding (Figure 1), suggestive of malignancy change. However, the initial pathology of biopsy via colonoscopy was chronic non-specific colitis. Further barium double contrast enema was scheduled and showed apple-core lesion (Figure 2) over distal transverse colon. Finally, operation was arranged and the pathology elucidated adenocarcinoma of colon. The patient is well in our regular follow-up visiting.

Discussion

The apple-core lesion of colon may be caused by a variety of diseases, such as adenocarcinoma [1,2], ischaemic colitis [3], infection [4,5], inflammatory colitis [6], endometriosis [7], and sequela of radiotherapy treatment [8]. Severe colonic lumen narrowing leads to bowel obstruction [9,10]. These differentials should be kept in mind and correlate with clinical manifestations to avoid misdiagnosis.

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