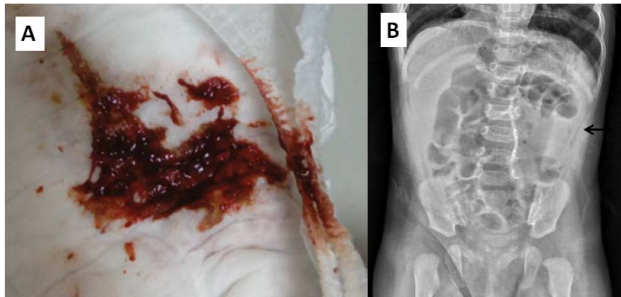


Clinical Image

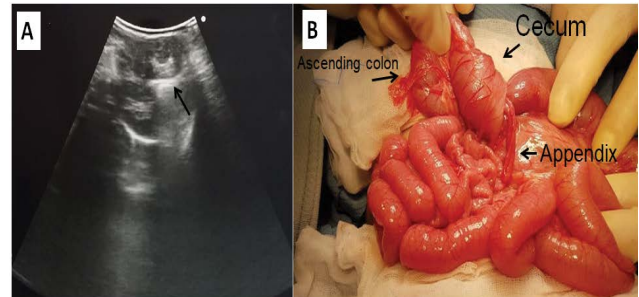
## Waugh's Syndrome: A Rare Presentation of Intussusception

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**Figure 1:** (A) Currant jelly stool was noted in diaper; (B) Abdominal radiograph show gas-dilated loops and no gas in distal intestine (black arrow).



**Figure 2:** (A) Ultrasonography showed a target lesion (black arrow) over left upper quadrant of abdomen; (B) Operation finding: ileo-cecal type intussusception with non-fixation of ascending colon.

**Keywords:** Waugh's syndrome; Intussusception; Malrotation

### Case History

A 3-month-old girl without underlying disease presented with non-bilious vomiting twice, and then suffered from currant jelly stool (Figure 1A) without irritable crying in 6 hours. Abdominal plain film showed gas dilated bowel loop and no gas in distal intestine (Figure 1B). Abdominal ultrasonography showed a target lesion (black arrow) over left upper quadrant of abdomen (Figure 2A). After laparotomy, ileo-cecal type intussusception with non-fixation of ascending colon was found (Figure 2B). Milking reduction of intussusception, incidental appendectomy and pexy for right side colon were performed. She recovered well after operation and discharged 4 days later.

The rare association of intestinal malrotation in conjunction with intussusception was termed Waugh's syndrome. It is important to be vigilant in children younger than three months with intussusception over atypical location, in these children have higher morbidity and mortality.

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