

Apple-Core Lesion of the Transverse Colon: A Harbinger of Adenocarcinoma

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1. Clinical Image

A 48-year-old female was admitted to the Emergency Department with complaints of abdominal pain for the past 2 days. Pain was sharp, intermittent, non-radiating and not associated with nausea or vomiting. She had never been screened for colon cancer. Family history was insignificant. Patient was afebrile with pulse 118 bpm, respiratory rate 18/min, BMI 38.62 kg/m² and saturating 97% on room air. The abdomen was hard, distended with tenderness in the umbilical region. Bowel sounds were normal. The remainder of the physical examination was unremarkable. The CT abdomen/pelvis showed apple core soft tissue lesion in the transverse colon. Markedly dilated loops of right colon consistent with large bowel obstruction was also seen. Patient underwent a right sided hemicolectomy. Tissue biopsy was consistent with moderately differentiated adenocarcinoma. The stage of the disease was pT3N0. The patient was started on chemotherapy. Close out-patient follow up was advised. The apple core sign is normally seen in the descending colon however in our patient this eccentric wall thickening with mucosal irregularity was seen in the transverse colon. Since the lesion was seen in the transverse colon the patient did not have obstruction earlier which might have led to the delay in the diagnosis. This case highlights the importance of physician correlation of the clinical manifestations with imaging characteristics for prompt diagnosis without delay in treatment.

