

Characteristic Computed Tomography Findings of Intersigmoid Hernia

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1. Clinical Image

A 52-year-old man with no surgical history was admitted to our hospital. Physical examination revealed tenderness in the lower abdomen. Contrast-enhanced computed tomography (CT) showed a closed-loop formation and edema of the distal ileum between the sigmoid colon and left psoas muscle (Figure A). Edema and a sac-like appearance of the ileum on the dorsal side of the sigmoid colon were also observed (Figures 1B and 2B). We strongly suspec-

ted a sigmoid-mesocolon hernia; therefore, surgery was urgently performed. The ileum was incarcerated in the intersigmoid fossa, with adhesions and released, with no sign of intestinal necrosis (Figure C). Intersigmoid hernias are very rare, accounting for 6% of all internal hernias [1]. Although it is often difficult to diagnose even with CT, and it may be diagnosed by exploratory surgery; this case showed some characteristic CT findings of intersigmoid hernia and was a rare case that could be diagnosed preoperatively [2].

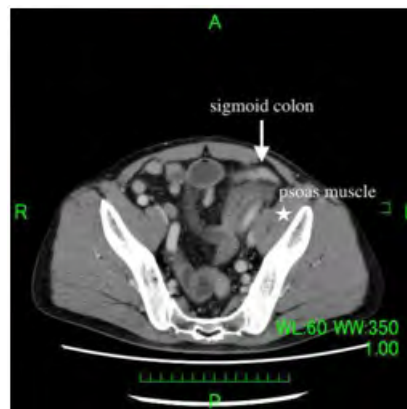


Figure A: A closed-loop formation and edema of the distal ileum between the sigmoid colon and left psoas muscle.

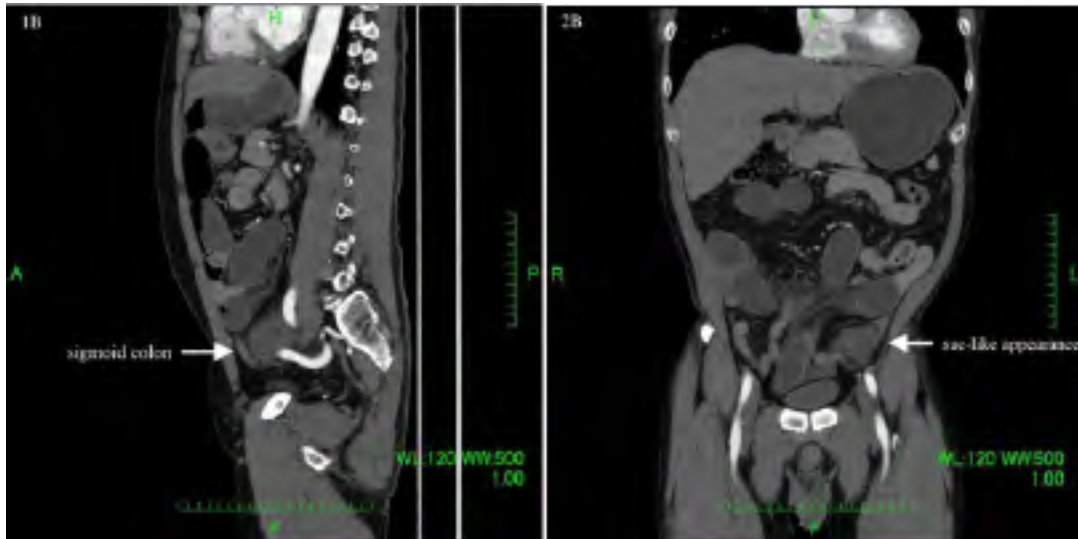


Figure B: Edema and a sac-like appearance of the ileum on the dorsal side of the sigmoid colon were also observed.



Figure C: No sign of intestinal necrosis.

References

1. Martin LC, Merkle EM, Thompson WM. Review of Internal Hernias: Radiographic and Clinical Findings. *AJR Am J Roentgenol.* 2006; 186(3): 703-717.
2. Lanzetta MM, Masserelli A, Addeo G. Internal hernias: a difficult diagnostic challenge. Review of CT signs and clinical findings. *Acta Biomed.* 2019; 90(Suppl 5): 20-37.