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Image of the month

Transstomal evisceration due to blunt abdominal trauma☆

Evisceración transestomal por trauma abdominal cerrado

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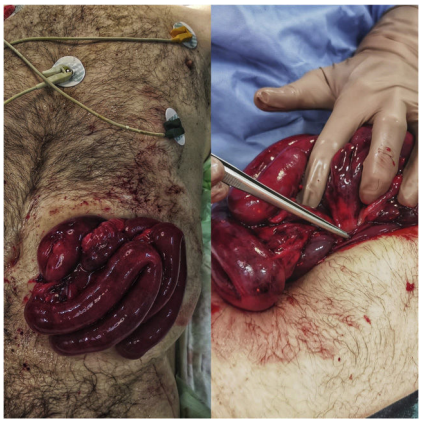

Figure 1

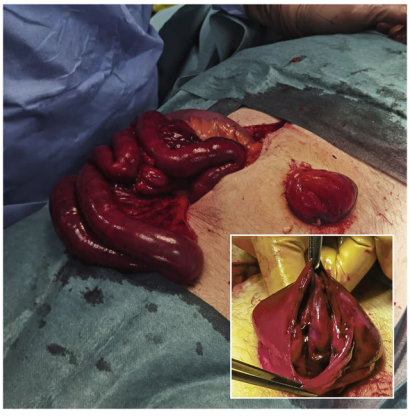

Figure 2

A 77-year-old patient with a history of open sigmoidectomy with terminal colostomy performed in the emergency department 4 years ago for occlusive adenocarcinoma of the colon.

The patient attended the emergency department for transcolostomy evisceration of small bowel loops, after blunt abdominal trauma due to a fall from own height (Figure 1).

No previous eventration on examination/CT.

Urgent surgery was indicated, approach through previous mid laparotomy. Reduction of the eviscerated contents with a congestive but viable appearance. Mucosal defect of 3 cm, associated with a 2 cm pericolostomy aponeurotic defect. Both were closed with loose absorbable braided sutures (Figure 2).

Discharged on the 4th postoperative day with no immediate complications and none at one year.

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