



## Image of the month

## Recurrent Abdominal Pain Due to Intussusception of Meckel Diverticulum<sup>☆</sup>



### Dolor abdominal recurrente causado por intususcepción de divertículo de Meckel

Rocío Martínez Mojarro,<sup>\*</sup> Paz González Benjumea, Beatriz García del Pino, María José Perea Sánchez

Servicio de Coloproctología, Hospital Juan Ramón Jiménez, Huelva, Spain

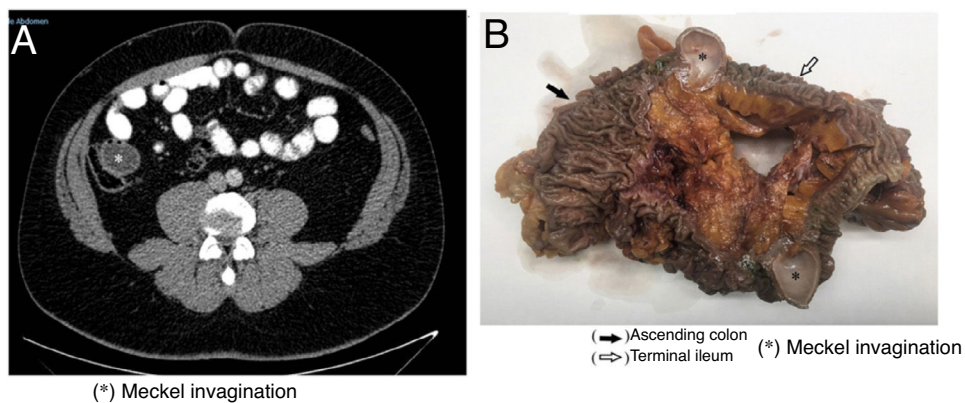


Fig. 1

A 49-year-old male presented with continuous abdominal pain in the right flank that had been progressing for one year and worsened with oral intake.

Lab work and colonoscopy found no anomalies. Ultrasound and abdominal CT scan (Fig. 1A) detected a cystic lesion measuring 4 cm in the terminal ileum compatible with appendicular mucocele.

During elective surgery, the appearance of the appendix was normal, and an intraluminal lesion was palpated. With a suspected diagnosis of ileocecal valve tumor, right hemicolectomy was performed.

The histopathological analysis identified a well-defined cystic lesion showing no neoplastic infiltration, corresponding with intussusception of Meckel diverticulum (Fig. 1B).

Diagnosis: intussusception of Meckel diverticulum.

<sup>☆</sup> Please cite this article as: Martínez Mojarro R, González Benjumea P, García del Pino B, Perea Sánchez MJ. Dolor abdominal recurrente causado por intususcepción de divertículo de Meckel. Cir Esp. 2019;97:531.

<sup>\*</sup> Corresponding author.

E-mail address: rommojarro@gmail.com (R. Martínez Mojarro).