

宿便性結腸穿孔の1例

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宿便性結腸穿孔は比較的稀な疾患である。今回我々は本症例の1例を経験した。

症例は66歳, 女性。腹痛を主訴に来院した。来院時腹部所見は板状硬で左下腹部に強度の圧痛を認め, 腸音は減弱していた。単純X線写真にて両側横隔膜下に遊離ガス像を認め, 下部消化管穿孔, 汎発性腹膜炎の診断にて緊急手術を施行した。手術所見では下行結腸から直腸内に硬便が充満していた。S字結腸に穿孔部を認め, その近傍に腸管内から脱出した便塊を認めた。手術はハルトマン手術を施行した。切除標本では穿孔部は楕円形であり, 手術所見, 病理組織学的所見とあわせて宿便性結腸穿孔と診断した。術後は経過良好であった。手術から12ヶ月後, 人工肛門閉鎖, 下行結腸直腸吻合術を施行した。

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A Case of Stercoral Colonic Perforation

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Stercoral colonic perforation is a relatively rare entity. This paper presents such a case in a 66-year-old woman.

The patient was visited the hospital because of abdominal pain. Her abdomen was board-like, there was severe tenderness in the left lower quadrant, and bowel sounds were hypoactive. The abdominal x-ray film showed free air beneath the bilateral diaphragm.

Lower gastrointestinal perforation and generalized peritonitis were diagnosed and an emergency operation performed. At laparotomy, the intestine from the descending colon to the rectum was filled with hard stool. A perforation was present in the sigmoid colon and, in the vicinity of the perforation, the stool mass had fallen away from the inside of the intestine. A Hartmann procedure was employed. On the resected material, the perforation was oval in shape. From operative and histopathological findings, a definite diagnosis of stercoral colonic perforation was made. The postoperative course was uneventful. Twelve months after the operation, closure of an artificial anus and an anastomosis between the descending colon and the rectum were performed. (Accepted on October 18, 2002) *Kawasaki Igakkaishi* 28(4): 297-301, 2002

Key Words ① Stercoral colonic perforation ② Generalized peritonitis

