

Unusual complication of colonoscopy

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DESCRIPTION

A 52-year-old woman presented with left upper quadrant abdominal pain. She was discharged from the outpatient surgical unit after she had screening colonoscopy. On presentation, her vitals were normal. She was found to have tenderness in the left upper quadrant. Initial X-ray of the abdomen did not reveal free air, but a subsequent CT scan of the abdomen showed haemoperitoneum and splenic haematoma (figure 1). The patient was taken to surgery and underwent splenectomy.

Splenic injury due to colonoscopy is a rare complication. The most common reason for splenic injuries during colonoscopy are due either to trac-

tion on the splenicocolic ligament or excess manipulation during the procedure to advance the scope beyond the splenic flexure.¹ Abdominal pain is the most common symptom but can also present with anaemia and leucocytosis. CT is the investigation of choice to evaluate the extent of injury. Treatment options include either observation alone or splenectomy; options are considered based on haemodynamic status and the size of the haematoma. There have been case reports describing treatment with splenic artery embolisation. Also, newer methods such as wrapping vicryl netting around the spleen can be considered; these have been successfully performed.²

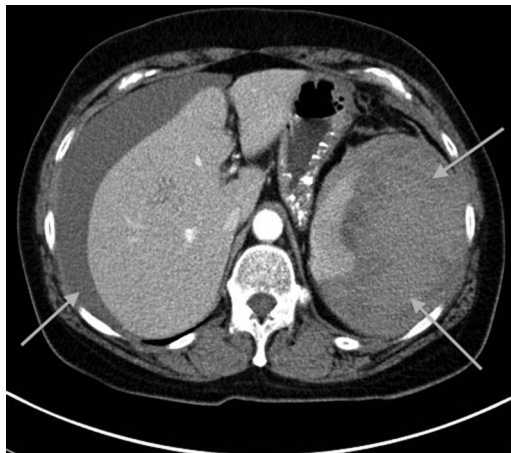


Figure 1 Axial view of CT of the abdomen shows haemoperitoneum and splenic haematoma (marked with grey arrows).

Learning points

- ▶ Splenic haematoma is a rare and unusual complication after colonoscopy.
- ▶ Abdominal pain after colonoscopy should raise suspicion for splenic haematoma and other complications.

Competing interests None declared.

Patient consent Obtained.

Provenance and peer review Not commissioned; externally peer reviewed.

REFERENCES

- 1 Castelli M. Splenic rupture: an unusual late complication of colonoscopy. *CMAJ* 1986;134:916–17.
- 2 Schilling D, Kirr H, Mairhofer C, et al. Splenic rupture after colonoscopy. *Dtsch Med Wochenschr* 2008;133:833–5.



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