Visible intestinal peristalsis
Taro Shimizu,1 Yasuharu Tokuda2

DESCRIPTION
A 52-year-old man who had a history of recurrent constipation presented with an intermittent nausea and vomiting that started 1 day prior. He had a history of Nissen fundoplication for the repair of a hiatus hernia. He also had congenital mental retardation and was not able to fully explain his symptoms. According to his caregiver, he had lost his appetite since 7 days prior. The caregiver also noted that his abdomen had increased in girth. One day prior, he started vomiting continuously and he was brought to the emergency room. He denied abdominal pain, back pain or recent trauma. Abdominal examination revealed a markedly distended abdomen and visible intestinal peristalsis, that is a specific finding of obstruction of intestine (video 1). Digital rectal examination showed a massive stool in his rectum, which was confirmed by abdominal CT without contrast (figures 1 and 2). After a manual faecal disimpaction followed by rectal enema administration, his abdominal symptoms disappeared.

Learning points
▸ Visible intestinal peristalsis strongly indicates intestinal obstruction.
▸ When a patient presents with nausea and vomiting, do not omit to uncover the patient, and inspect the abdominal surface. This may lead physicians to the diagnosis promptly.

Contributors
TS and YT participated in the patient care and wrote the manuscript.
Competing interests None.
Patient consent Obtained.
Provenance and peer review Not commissioned; externally peer reviewed.

REFERENCE