



Colo-Ostium Fistula Caused by Colonic Foreign Body

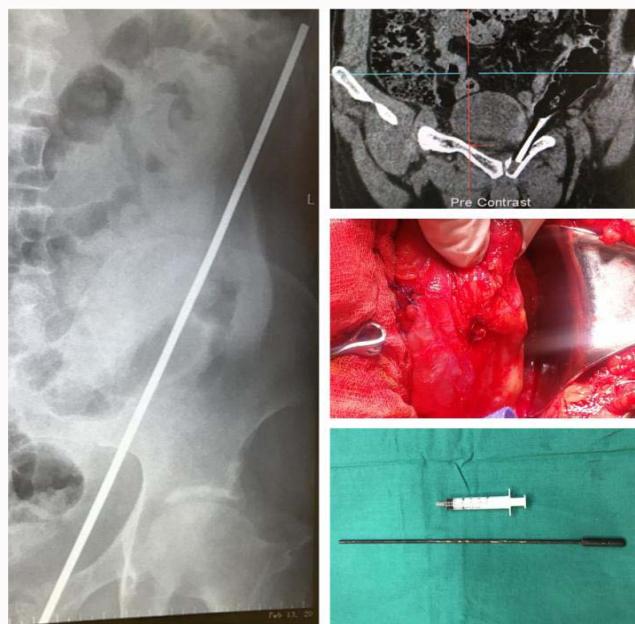
Zhifen Chen^{1*} and Moneimang Makgasa²

¹Department of Colorectal Surgery, Fujian Medical University Union Hospital, China

²Department of General Surgery, Sidilega Private Hospital, Botswana

Clinical Image

A 64-year-old man was referred to the surgical department with 2-week history of left lower quadrant pain, difficulty sitting up and an abdominal X-ray showing intra-abdominal foreign body. Of note 3 months prior he inadvertently inserted a rubber coated iron rod in the rectum while scratching pruritus ani but never passed it. There were no other gastrointestinal symptoms. On abdominal exam, there was a laparotomy scar, no distension and the abdomen was soft, no tender with no palpable mass. Blood tests were normal. We did an abdominal CT that showed an iron rod in the recto-sigmoid, extending to the left pubic bone. During Laparotomy there were extensive adhesions from previous surgery but no peritoneal contamination or abscess, which were due to the previous abdominal operation. Adhesiolysis was performed to mobilize the sigmoid colon, revealing a rod in the recto-sigmoid junction, pushing the colon against the left pubic bone and forming a colo-ostium fistula (Figure 1). Colotomy was done to extract the rod and the fistula tract was excised. The patient recovered well post operation.



OPEN ACCESS

*Correspondence:

Zhifen Chen, Department of Colorectal Surgery, Fujian Medical University Union Hospital, Fuzhou, Fujian, China,
E-mail: chenzhifen@fjmu.edu.cn

Received Date: 01 Jun 2021

Accepted Date: 15 Jun 2021

Published Date: 17 Jun 2021

Citation:

Chen Z, Makgasa M. Colo-Ostium Fistula Caused by Colonic Foreign Body. *Clin Surg*. 2021; 6: 3216.

Copyright © 2021 Zhifen Chen. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.