

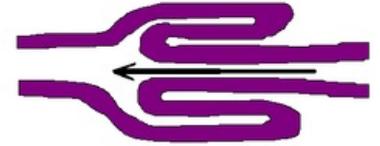
Invagination

This article is a stub.



You can join the authors (<https://www.wikilectures.eu/index.php?title=Invagination&action=history>) and it. You can discuss the changes at discussion.

Latin **intussusception** (intus = inside, suscipio = capture). The invagination is characterized by the telescopic insertion of the proximal segment of the intestine into the distal segment (ie in the direction of peristalsis). Mechanism Invagination causes **intestinal obstruction**, which combines mechanical obstruction with **strangulation** of the involved mesentery. The inserted section is oriented with the mucosa outwards, so the intestine has 3 walls in a given place. The outer part is called the invaginans and the inner invaginatum. It is most often **ileocecal invagination** (see below), other types are less common. The disease mainly affects infants between the age of six months and the second year of life.



Invagination

Examples

Depending on the location, there are:

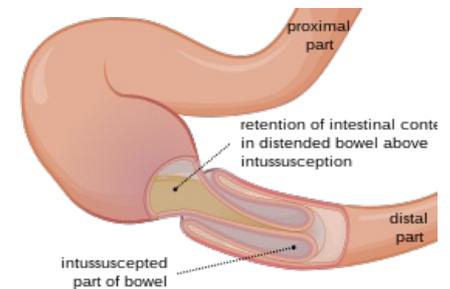
- **invaginatio enterica** – small intestine in small;
- **invaginatio ileocaecalis** – small intestine to large
- **invaginatio colica** – colon to large.

Etiology

- The cause in infants and toddlers cannot be determined in most cases. The cause is generally thought to be the **interaction of various factors**: intensified intestinal peristalsis, intestinal wall oedema, hypertrophy of the Peyer's patches and proliferation of mesenteric nodes. The seasonal occurrence of invaginations is explained by lymphoid hypertrophy of the intestinal wall during adenoviral or rotavirus infections.
- In older children, invaginations caused by the so-called leading point predominate: intestinal polyp, diverticulum, hemangioma, tumour, hematoma in the intestinal wall in Henoch-Schonlein purpura or viscous intestinal contents in cystic fibrosis.
- Over the age of 5, the most common cause of invagination is **lymphoid infiltration** of the intestine in non-Hodgkin's lymphoma.
- In adults, in most cases, it is caused by a leading point that is a bowel tumour



Invagination on CT



Intussusception

Consequences

In most cases, the automatic adjustment will occur. Failure to do so does not result in early intervention due to long-term pressure on the blood vessels to hyperemia (a condition in which blood flow through the veins is not allowed, leading to local accumulation), which may escalate in hemorrhagic infarction (oxygen supply in a given part of the gut is not allowed). Intestinal wall necrosis is associated with life-threatening peritonitis.

Treatment

Conservative:

- rectally administered aqueous solution, which we monitor under ultrasound;
- rectally induced barium infusion, air insufflation under X-ray.

Surgical

References

Related Articles

- Sudden abdominal events in childhood

Source

- POVÝŠIL, Ctibor – ŠTEINER, Ivo. *Speciální patologie*. 2. edition. Galén : Karolinum, 2007. ISBN 978-80-7262-494-2.
- ŠNAJDAUF, Jiří – ŠKÁBA, Richard. *Dětská chirurgie*. 1. edition. Galén, 2005. ISBN 807262329X.