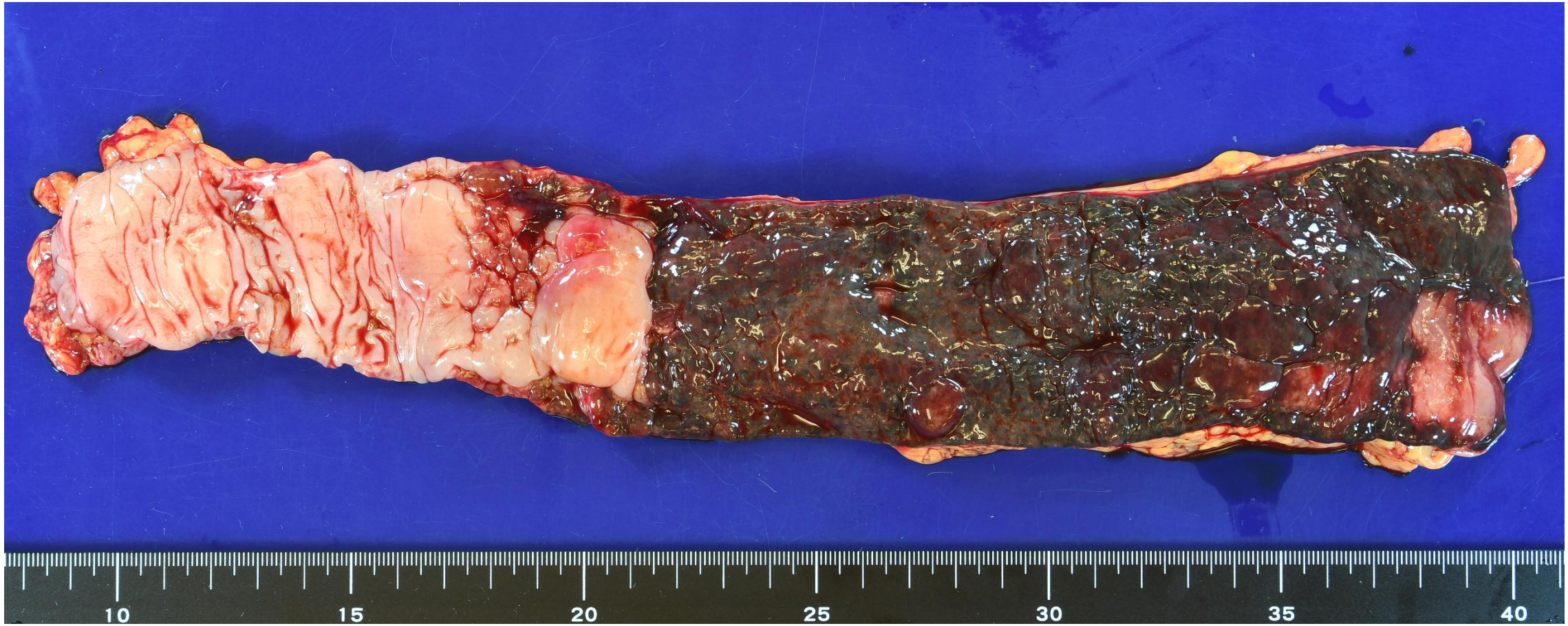
Obstructive colitis

Obstructive colitis is a necrotizing inflammatory condition observed in the colon proximal to benign or malignant stenotic lesions. The pathogenesis is related to ischemia due to impairment of blood supply secondary to elevation of the endoluminal pressure, distension of the colonic wall and other factors impairing adequate perfusion. It is frequently seen in elderly patients. There is an abrupt transition between affected and normal bowel, and a segment of the preserved mucosa is consistently present on the proximal side of the stenosis. The stenosis, mostly rectosigmoid in location, is commonly caused by adenocarcinoma, constipation-related fecal impaction and diverticular disease. Massive dilatation with stretching and thinning of the bowel wall may provoke perforation or transmural necrosis. Three cases are presented.

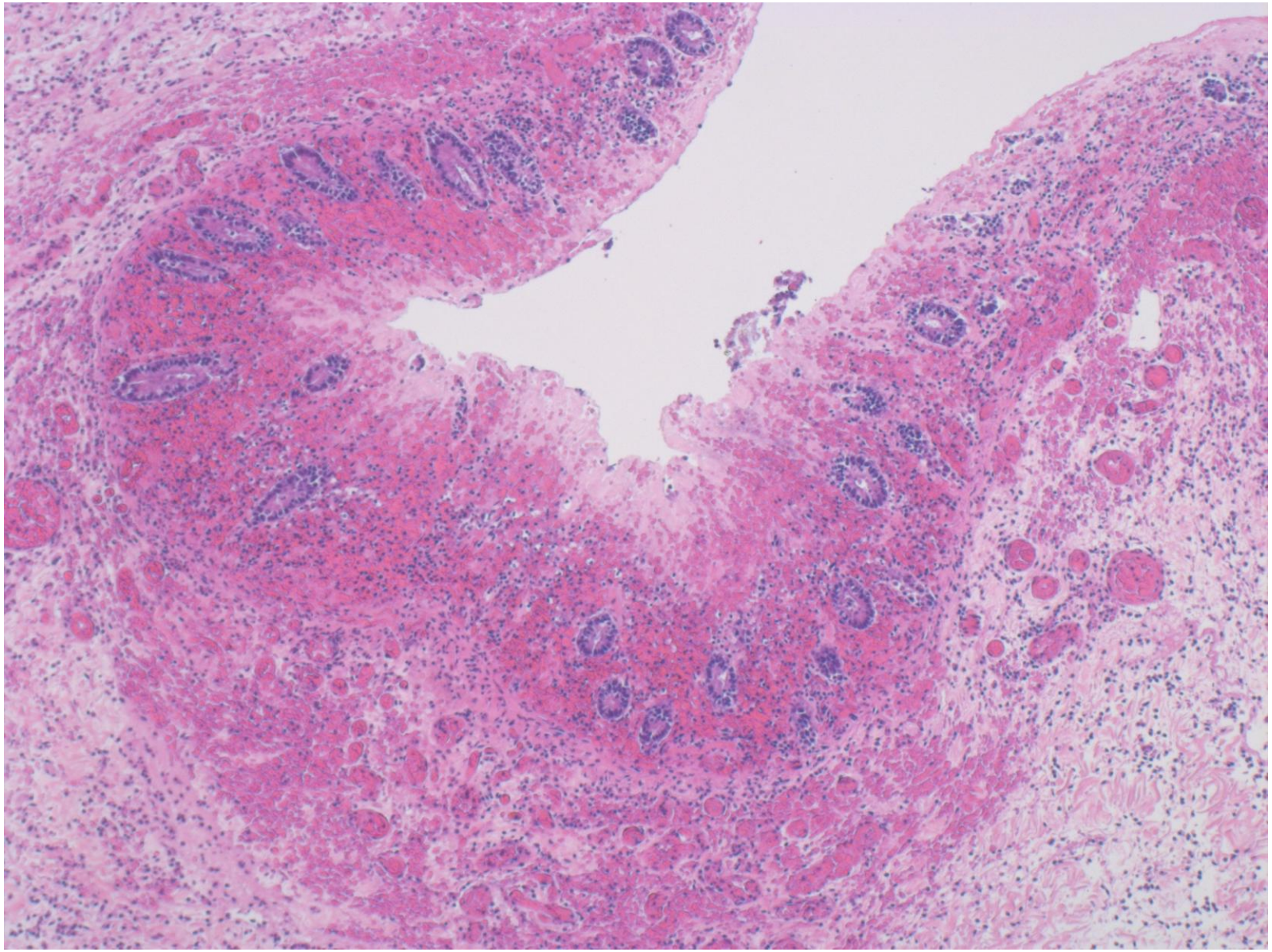
Ref.: Gratama S, et al. Obstructive colitis: an analysis of 50 cases and a review of the literature. Pathology 1995; 27(4): 324-329. doi: 10.1080/00313029500169233

Case 1



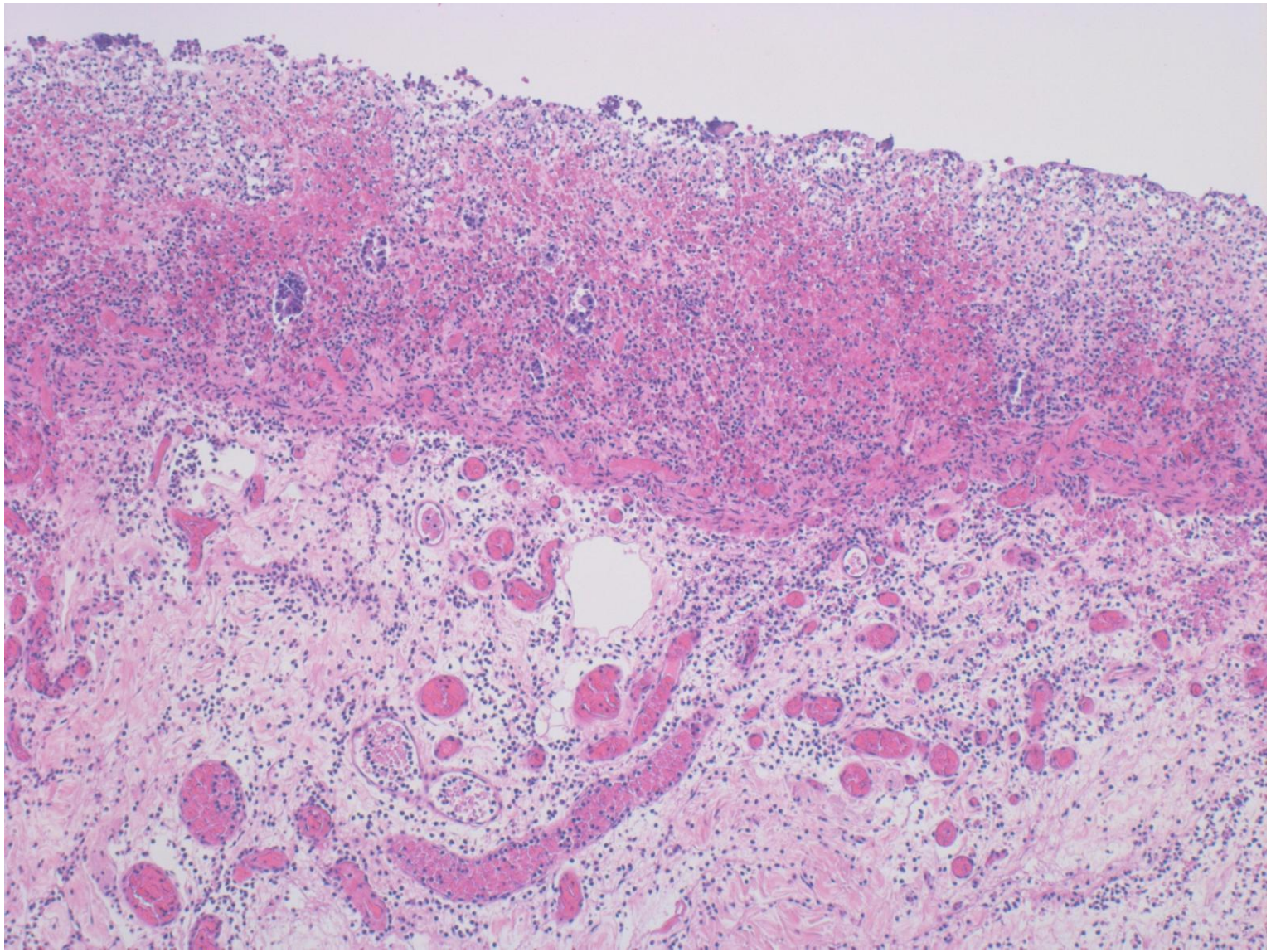
Obstructive colitis seen in a 73-year-old woman necessitated emergency operation. The cause is constipation-related fecal impaction in the rectum. Necrohemorrhagic colitis is observed in the sigmoid colon. An abrupt transition between affected and normal bowel is evident. A segment of the preserved mucosa is present on the proximal side of the stenosis.

Case 1



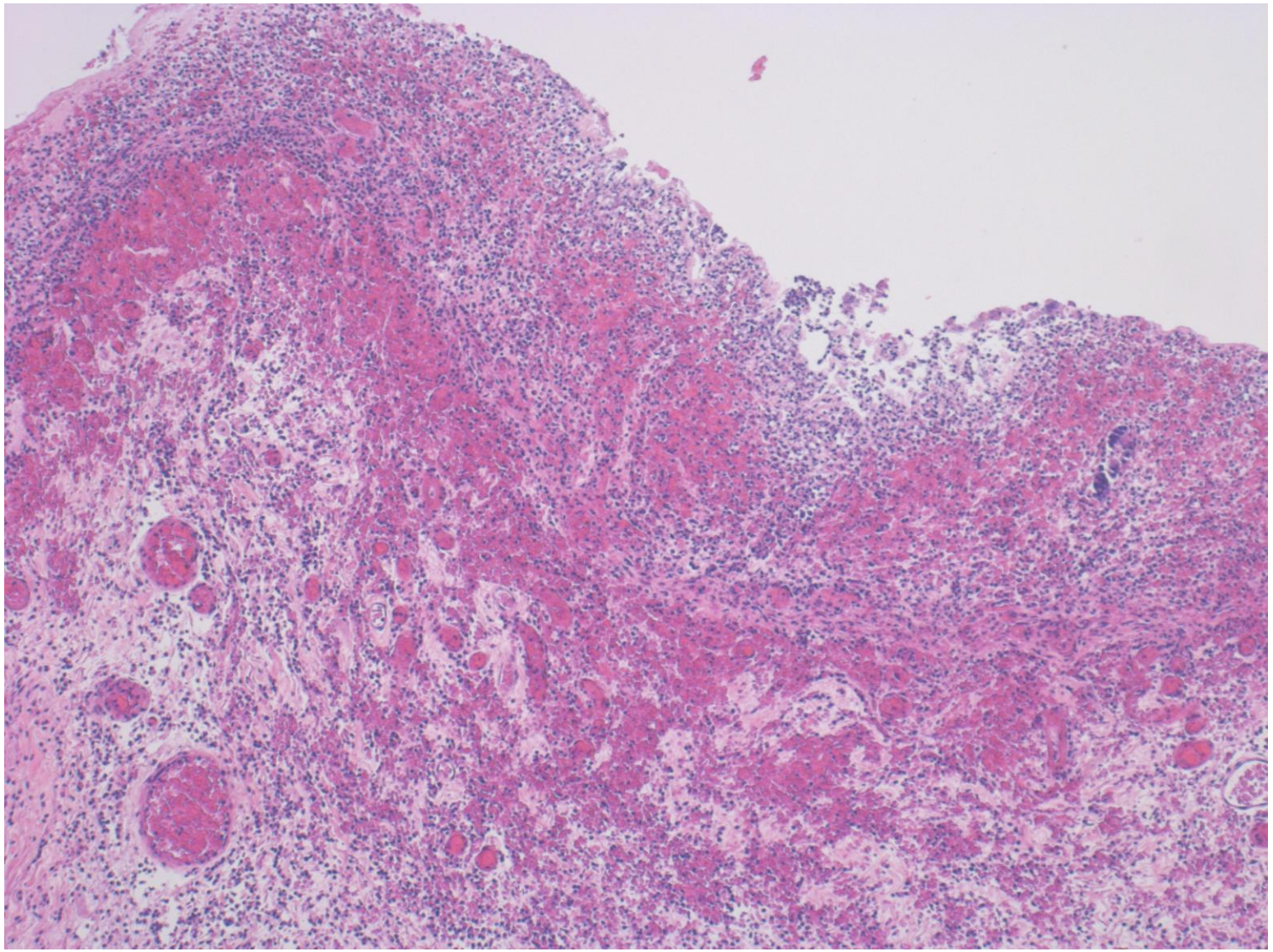
Obstructive colitis seen in a 73-year-old woman necessitated emergency operation. The cause is constipation-related fecal impaction in the rectum. The colonic mucosa reveals acute hemorrhagic necrosis. H&E-1

Case 1



Obstructive colitis seen in a 73-year-old woman necessitated emergency operation. The cause is constipation-related fecal impaction in the rectum. The colonic mucosa reveals acute hemorrhagic necrosis. H&E-2

Case 1

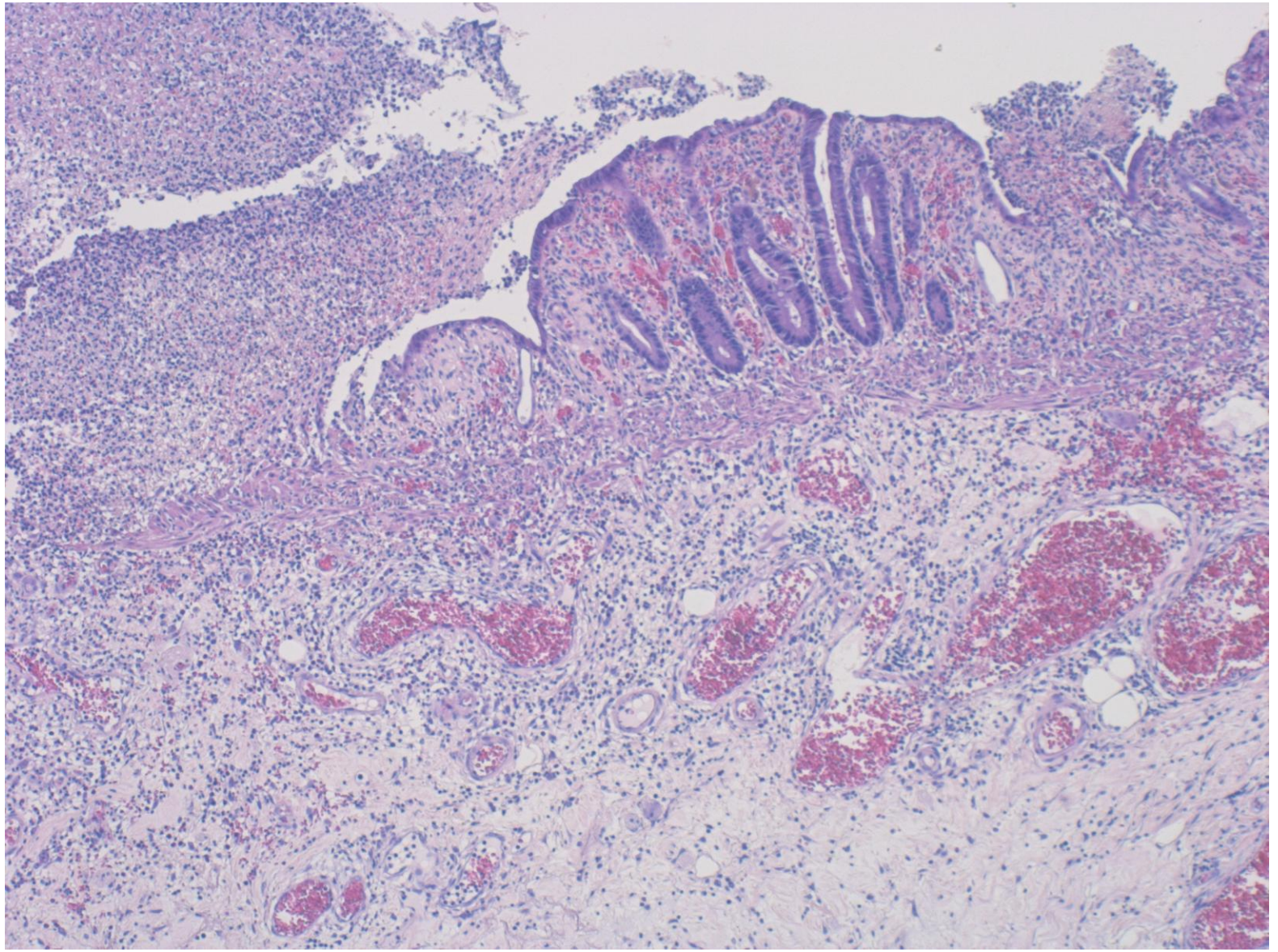


Obstructive colitis seen in a 73-year-old woman necessitated emergency operation. The cause is constipation-related fecal impaction in the rectum. The colonic mucosa reveals acute hemorrhagic necrosis. H&E-3

Case 2

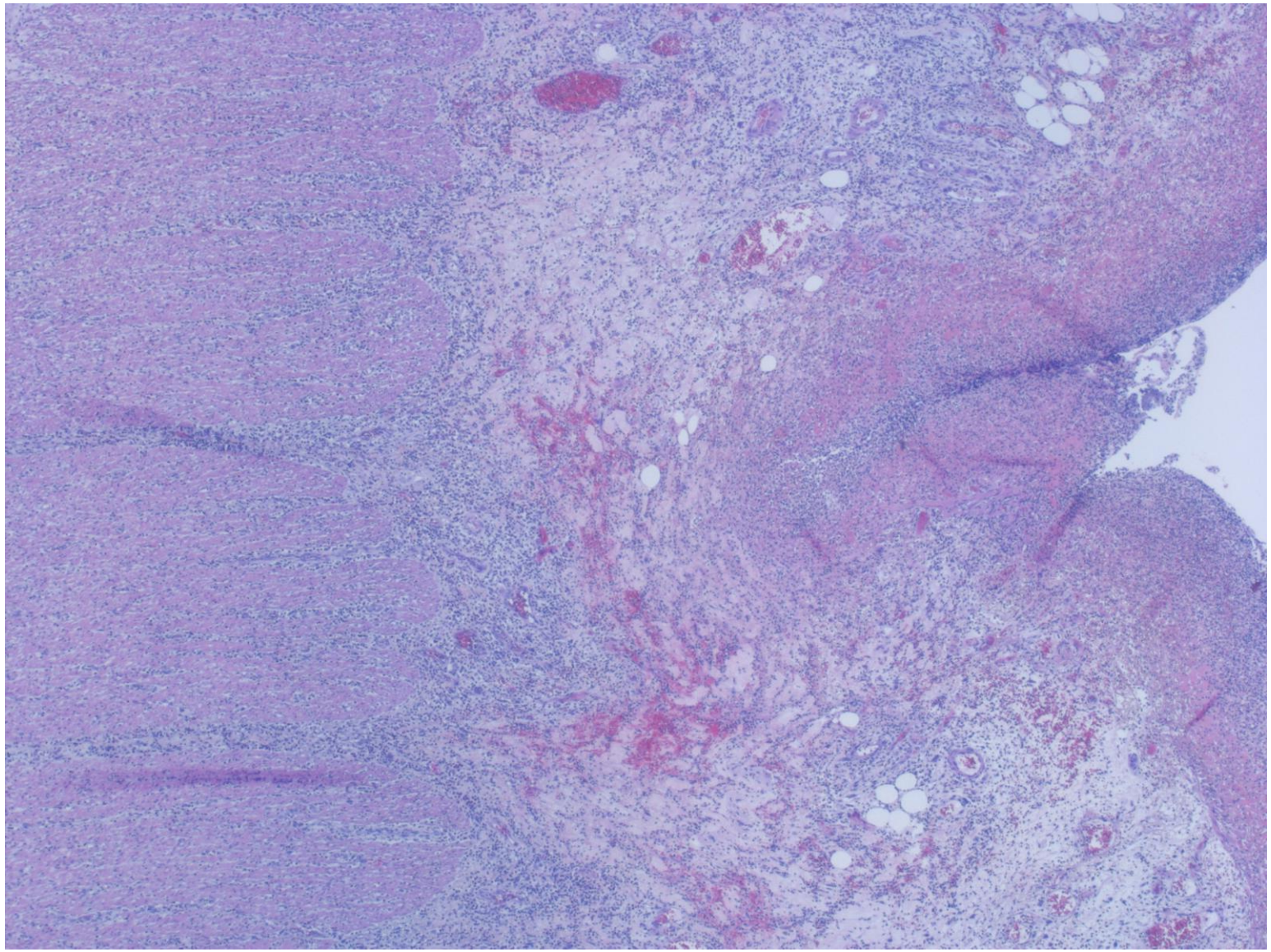
Obstructive colitis seen in a 65-year-old man necessitated emergency operation (photographed after formalin fixation). The cause is sigmoid colon adenocarcinoma. Necrohemorrhagic colitis is observed in the descending colon. An abrupt transition between affected and normal bowel is evident. A segment of the preserved mucosa is present on the proximal side of the stenosis.

Case 2



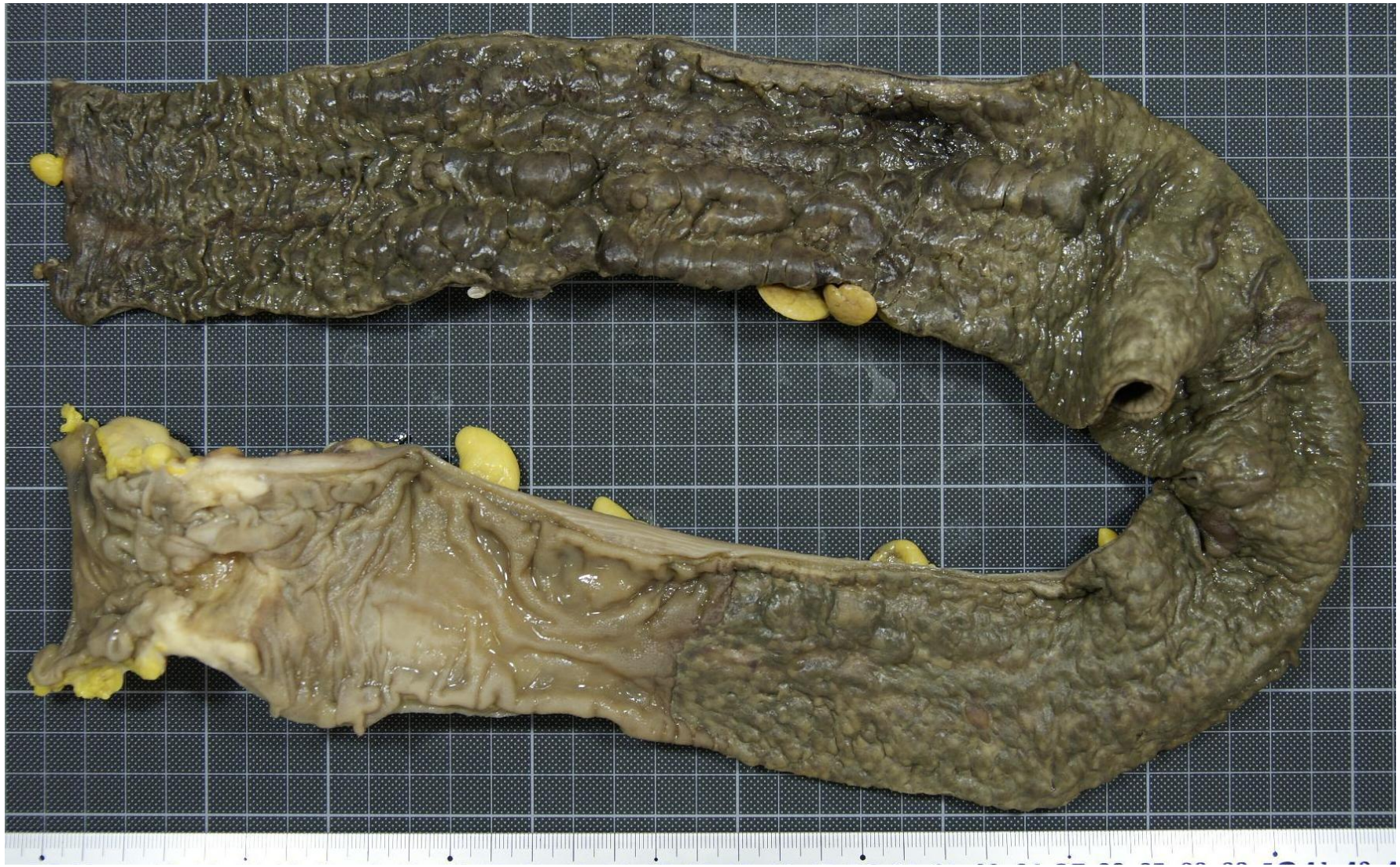
Obstructive colitis seen in a 65-year-old man necessitated emergency operation. The cause is sigmoid colon adenocarcinoma. The colonic mucosa reveals ischemic necrosis with erosive changes. H&E-4

Case 2



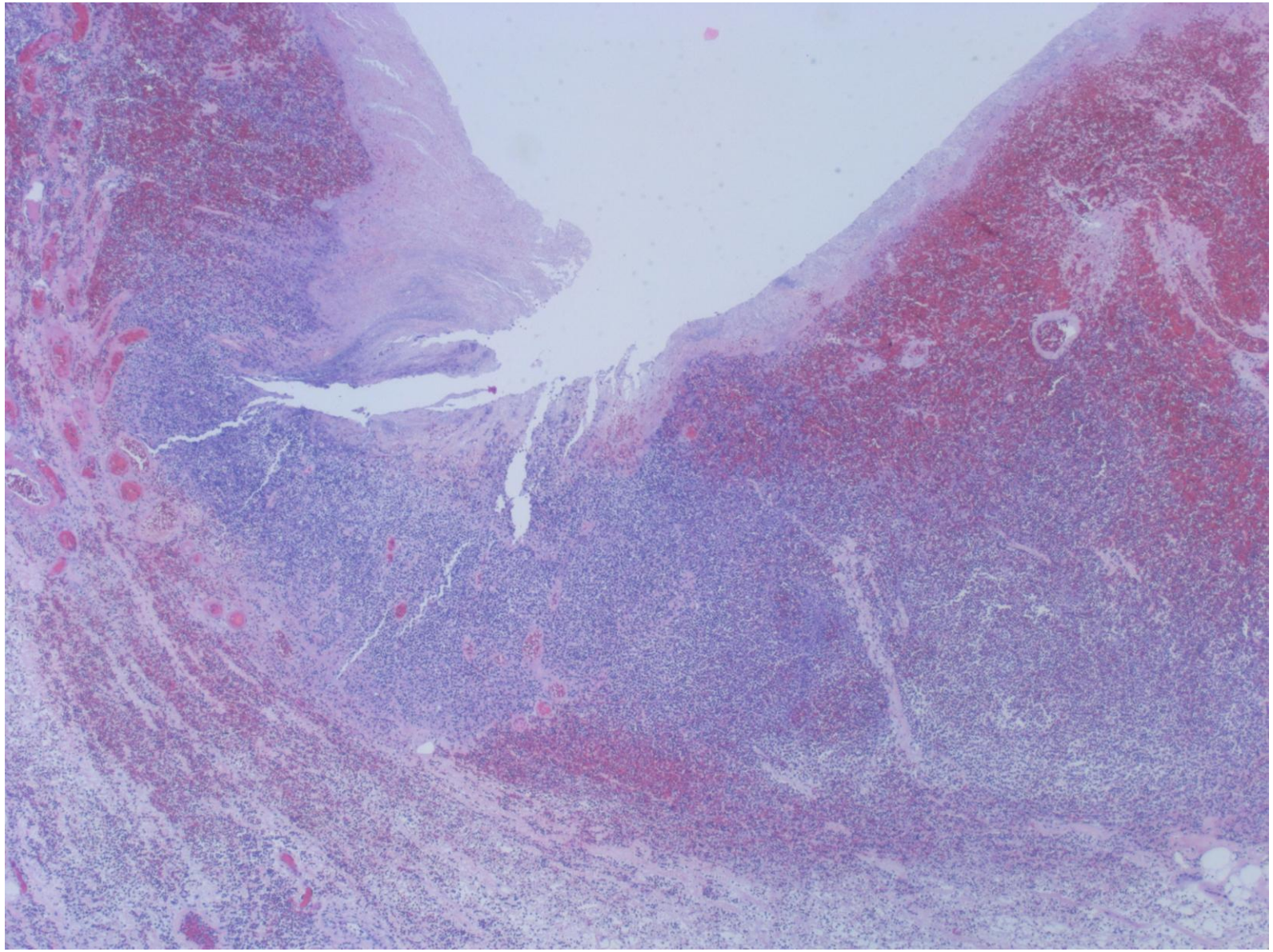
Obstructive colitis seen in a 65-year-old man necessitated emergency operation. The cause is sigmoid colon adenocarcinoma. The colonic mucosa reveals ischemic necrosis with erosive changes. H&E-5

Case 3



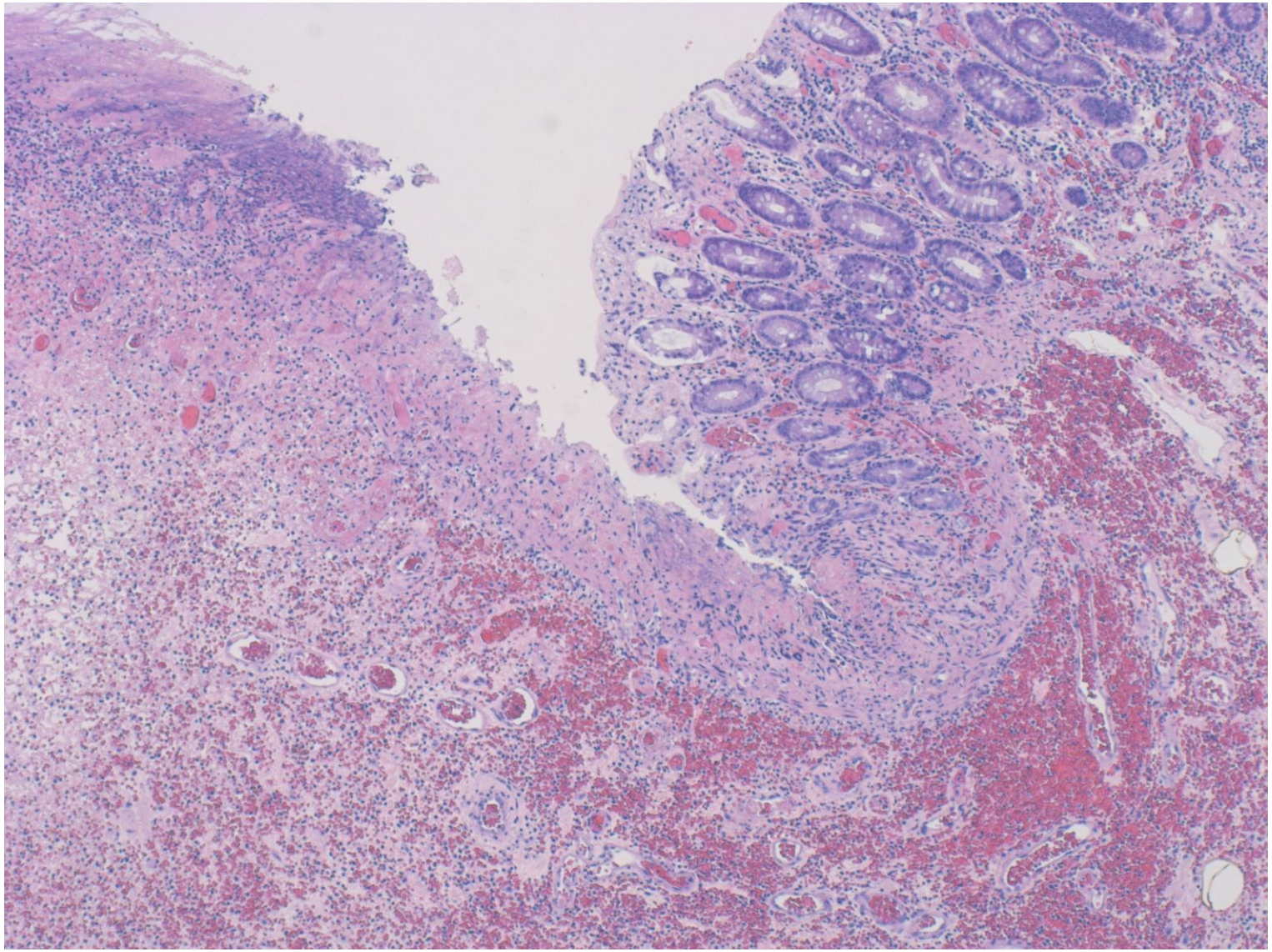
Obstructive colitis seen in an 86-year-old woman necessitated emergency operation (photographed after formalin fixation). The cause is sigmoid colon adenocarcinoma. Necrohemorrhagic colitis is observed in the descending colon. An abrupt transition between affected and normal bowel is evident. A segment of the preserved mucosa is present on the proximal side of the stenosis.

Case 3



Obstructive colitis seen in an 86-year-old man necessitated emergency operation. The cause is sigmoid colon adenocarcinoma. The colonic mucosa reveals hemorrhagic necrosis with erosive changes. H&E-6

Case 3



Obstructive colitis seen in an 86-year-old man necessitated emergency operation. The cause is sigmoid colon adenocarcinoma. The colonic mucosa reveals ischemic necrosis with erosive changes and submucosal hemorhage. H&E-7