A Case of Pneumoscrrotum Following Spontaneous Colonic Perforation and Mimicking Strangulated Inguinal Hernia

Rahele Mehraeen¹, MD; Soheil Osia², MD

¹Department of Radiology, ²Department of Surgery, Amirkola Hospital, Babol University of Medical Sciences, Babol, Iran

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Sir,

We would like to present an idiopathic sigmoid colon perforation revealed with a rare manifestation of pneumoscrrotum.

A forty two days old boy was referred to us because of agitation, progressive abdominal distention and swollen scrotum (Fig. 1). There were not any symptoms of other gastrointestinal tract such as nausea, vomiting, diarrhea, fever and the change of the stool color.

On physical examination, the infant had tachycardia and tachypnea. His abdomen had distention but was soft and lax, and his scrotum had swelling with red skin that led us into a consideration of strangulated inguinal hernia.

Portable CXR was normal but plain abdominal x-ray three hours later revealed bowel distention, specially in the distal colon, with free intraperitoneal gas (Rigler’s sign)(Fig 2). A small bubble of gas was seen in the left scrotal region. According to the Rigler’s sign, we made a tentative diagnosis of bowel perforation resulting from left sided inguinal hernia.

Fig. 1: A 42 day old boy with agitation, progressive abdominal distention and an erythematus swollen scrotum

* Corresponding Author; Address: Department of Radiology, Amirkola Hospital, Babol University of Medical Sciences, Babol, Iran
E-mail: sany_monzavi@yahoo.com

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