



Image of the Month

Right Hydronephrosis Secondary to Fecal Impaction[☆]



Hidronefrosis derecha por fecaloma

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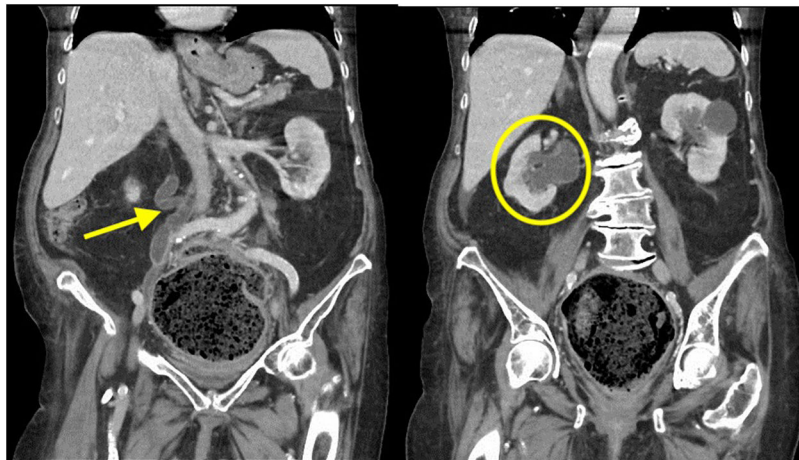


Fig. 1

The patient is a 90-year-old woman with a history of chronic constipation. She described abdominal pain that had been progressing for one week with associated overflow diarrhea, nausea and vomiting. Lab work showed deterioration of renal function with a creatinine level of 3.23 mg/dL. CT scan revealed a large fecaloma that occupied the rectal ampulla, sigmoid and descending colon, which extended to the epigastrium and had a maximum craniocaudal length of 35 cm, lateral diameter of 12.7 cm and anteroposterior of 14.8 cm. The fecaloma was compressing the right pelvic ureter, causing uretero-pyelocaliceal dilation and changes associated with obstructive uropathy and hydronephrosis (Fig. 1).

We extracted the fecaloma manually under sedation, after which creatinine levels and intestinal transit normalized progressively.

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