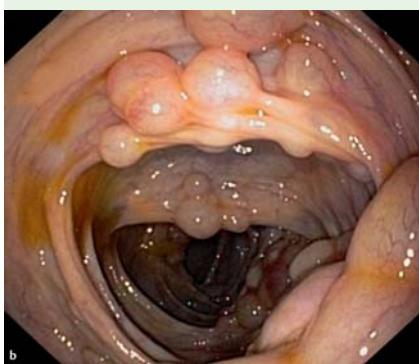
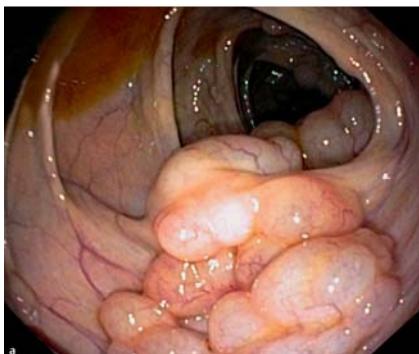


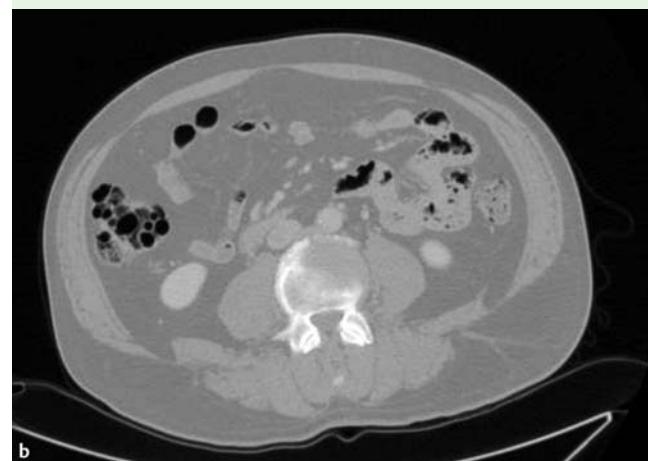
## Pneumatosis cystoides intestinalis of the ascending colon



**Fig. 1** Endoscopic view of pneumatoses: **a** in the hepatic flexure and **b** in the ascending colon.

Pneumatosis cystoides intestinalis (PCI) is a rare condition in which multiple submucosal or subserosal air-filled cysts develop in the submucosa or in subserosa of the colon [1]. The etiological mechanisms are not clear. PCI is associated with raised intra-abdominal pressure because of ileus surgery, colonoscopy, pulmonary diseases, connective tissue disorders, ingestion of carbohydrates such as lactulose and sorbitol, use of  $\alpha$ -glucosidase inhibitors [1], and ulcerative colitis [2]; in rare cases it is asymptomatic [3].

We report a case of a 52-year-old man referred to our department for nonspecific abdominal pain. He was not taking any drugs and his medical history was unremarkable except for an episode of signifi-

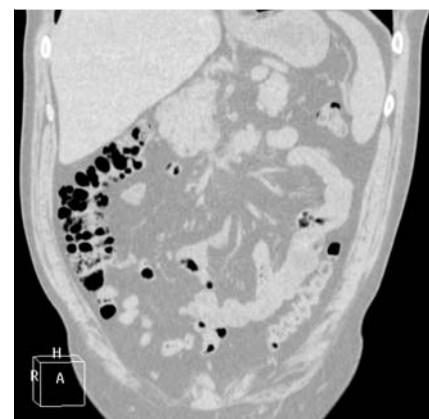


**Fig. 2** Abdominal computed tomographic (CT) scan (coronal section) showing pneumatoses: **a** in the proximal ascending colon and **b** in the distal ascending colon.

cant abdominal trauma. Colonoscopy revealed multiple, small, smooth hemispherical protrusions in the ascending colon extending up to the hepatic flexure (**Fig. 1**). Computer tomography (CT) of the abdomen showed multiple air-filled cysts in the intestinal wall along the right hemicolon (**Figs. 2, 3**). The diagnosis of PCI was made on the basis of these findings, as shown by Tsujimoto et al. in 2008 [1].

**Competing interests:** None

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**Fig. 3** Computed tomographic (CT) scan showing multiple air-filled cysts in the intestine wall along the right hemicolon.

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