Case Report: Giant Sigmoid Diverticulum

Objective
Giant sigmoid diverticulosis is commonly seen. Rarely a single diverticulum can massively enlarge resulting in a giant diverticulum. It usually presents with unspecific signs and symptoms. An abdominal CT scan is recommended for diagnosis. Whether a colonoscopy should be done is a matter of contention. Surgery is the only treatment option.

Methods
An 80 year old woman complained constipation and diffuse abdominal pain for several months. A colonoscopy revealed a diverticulosis without signs of an acute inflammation as well as an obscure extra intestinal impression of the sigmoid colon. The following CT scan showed a structure of 7.5 x 8.5 cm containing air or gas next to the sigma (Figure 1).

Results
Due to the symptoms and uncertain origin of the mass, a diagnostic laparoscopy was performed. Because of adhesions between the mass, the left ureter and the pelvic wall, an open sigmoid resection was performed. The patient recovered well and the symptoms disappeared after the operation. Pathology confirmed the diagnosis of a giant diverticulum (Figure 2). Microscopy showed a thin collagen wall with a chronic inflammatory infiltration.

Conclusion
Giant sigmoid diverticula occur with diffuse and variable signs and symptoms. Due to the risk of rupture surgery is recommended.

References
• Giant colonic diverticulum: Clinical presentation, diagnosis and treatment: Systematic review of 166 cases’ (Nigri et al. 2015, WJG)
• Giant diverticulum: A case report (Durgakeri et al. 2015, AMJ)
• Giant Sigmoid Diverticulum: A Rare Presentation of a Common Pathology’ (Guarnieri et al. 2009, Case Rep Gastroenerol)
• Giant diverticulum – A rare complication of a common surgical condition’ (Cubas et al. 2015, Clinical Case Reports)