

# Intestinal intussusception secondary to massive sand intake

## Abstract

We present a very atypical case of intestinal intussusception secondary to massive sand intake.

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## Introduction

We present the case of a previously healthy 9-month-old infant who went to the Emergency Department due to a 7-hour evolution of paroxysms of abdominal pain with vegetative symptoms that alternated with hypoactivity and progressive lethargy. Anorexia and vomiting were also associated, fever was absent and the last stool was 12 hours prior, with normal characteristics. Vital signs were normal. On physical examination, the involvement of the general state with obtundation was noteworthy. The meningeal signs were negative, and there was no neurological focality. The abdomen was painful and presented tenderness on the right flank without signs of peritonism. Blood analysis was normal, and urine was negative for toxins. Abdominal radiograph revealed abundant radiopaque material in the small and large intestines without signs of intestinal perforation or pneumatosis (Figure 1). Abdominal ultrasonography confirmed ileocolic invagination. The parents denied the administration of contrast but reported copious sand intake 10 hours before the onset of symptoms. In view of the clinical suspicion of intestinal invagination secondary to massive sand intake, ultrasound guided hydrostatic reduction was performed. During the procedure, the symptoms suddenly ceased and the patient became asymptomatic. A large amount of sand was removed. Sand enteropathy due to ingestion of sand is rather common in horses.<sup>1</sup> Geophagia is a form of pica considered normal in some cultures. Its aetiology is multifactorial and has been postulated as a marker of possible micronutrient deficit.<sup>2</sup> One of its complications is intestinal obstruction and may be the point of origin of an intestinal intussusception.<sup>3-5</sup>



**Figure 1** Simple abdominal radiography demonstrating the presence of radiopaque material in both distended distal ileum and normal-appearing colon in relation to massive sand intake.

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## Conflicts of interest

The authors declared there is no conflict of interest.

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