

**INTUSSUSCEPTION: ETIOLOGY, CLINICAL FEATURES, DIAGNOSIS, AND
MANAGEMENT**

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Abstract

Intussusception is a serious gastrointestinal condition in which a segment of the intestine telescopes into an adjacent segment, leading to intestinal obstruction and compromised blood supply. It is most commonly seen in infants and young children but can also occur in adults. Early diagnosis and prompt management are essential to prevent severe complications such as bowel ischemia, necrosis, and perforation.

Introduction

Intussusception is one of the most common causes of acute intestinal obstruction in children under two years of age. The condition occurs when the proximal segment of the intestine (intussusceptum) invaginates into the distal segment (intussusciens).

Etiology

In children, intussusception is often idiopathic but may be associated with Peyer's patch hypertrophy, Meckel's diverticulum, or intestinal polyps. In adults, it is commonly caused by benign or malignant tumors, adhesions, or inflammatory bowel disease.

Pathophysiology

The telescoping bowel compresses mesenteric vessels, causing venous congestion, edema, ischemia, necrosis, and possible perforation if untreated.

Clinical Presentation

Children present with intermittent abdominal pain, vomiting, currant jelly stools, and lethargy. Adults often present with abdominal pain, nausea, vomiting, and bowel obstruction.

Diagnosis

Ultrasound is the first-line diagnostic tool in children, showing a target sign. CT scan is the gold standard in adults.

Management

Non-surgical air or contrast enema reduction is effective in children. Surgery is required if non-surgical methods fail or in adult cases.

Prognosis

With early diagnosis and appropriate treatment, the prognosis of intussusception is excellent, particularly in pediatric patients. Delayed treatment increases the risk of complications and mortality.

Conclusion

Intussusception is a medical emergency requiring rapid diagnosis and management. Awareness of its clinical features and appropriate use of imaging techniques are crucial for favorable outcomes. Early intervention significantly reduces morbidity and mortality associated with this condition.

References

- 1.Stringer MD, Pablot SM, Brereton RJ. Paediatric intussusception. Br J Surg.
- 2.Marinis A et al. Intussusception of the bowel in adults. World J Gastroenterol.
- 3.UpToDate. Intussusception in children and adults.